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THE KEY OF PROGRESS

The **KEY of PROGRESS**
A SURVEY OF THE STATUS AND
CONDITIONS OF WOMEN IN INDIA

By SEVERAL CONTRIBUTORS

With a Foreword by H.E. THE
LADY IRWIN. *Edited by*
A. R. CATON

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FOREWORD

IT has been my privilege while in India to come into close touch with much of the work that is being done for the advancement of women, and to discuss with many people their aspirations and their schemes for further development and progress.

I am profoundly convinced that the future of that great country largely depends on the education and welfare of the women of India, and I have found that this view is widely shared by both men and women in India.

Published at a time when this need is so clearly realized, and when there is so much widespread enthusiasm and desire to work for the good of women in India, this little book should be of great value.

Miss Caton and her collaborators have provided us with a very comprehensive survey of facts and conditions, and a record of many of the organizations in India which are working so splendidly on behalf of women.

I hope that the book will be widely read by those in this country who are interested in the women's movement in India, and that it will help them to understand the ideals and hopes of Indian women of the present day.

DOROTHY IRWIN.

INTRODUCTION

THE principal object of this handbook, as stated in a letter circulated to experts and workers in India, is to present in a convenient form to British readers the main facts concerning women in India and the various reformatory activities at work. It is not fully realized in this country what intense general interest is focused in India upon the advancement of women, and how fundamentally this is bound up with the social welfare and progress of the country. These facts are continually emphasized in official publications and reports, which contain much interesting material bearing on the varied aspects of the subject. But the material has not so far been brought together in a concentrated, easily accessible, and inexpensive compilation, such as we have attempted. We hope, therefore, that the handbook may be of some value to workers in India. We have been fortunate in the publication, while we were yet engaged in our task, of two epoch-making reports—the Interim Report of the Statutory Commission (on education) and the Report of the Age of Consent Committee.

In dealing with social evils, we have neither depicted them in lurid colours nor sought to hide them, but have allowed the facts to speak for themselves. It is doing no service to Indian women to minimize their sufferings or the difficulties of their task in achieving a complete freedom. Outstanding Indian reformers, both men and women, have won respect by facing facts as resolutely as the reformers of any country.

Although it is one of the main aims of our book to give a full record of the many organizations and movements at work in India, it has proved a most difficult

task to obtain the necessary data in dealing with so vast a field. Any failure on our part to do justice to valuable work relevant to our subject is certainly unintentional, and should a later edition be forthcoming we should endeavour to repair any such omission. Suggestions on this point will be particularly welcome.

As to method, to supplement published material we have sought the individual opinions of experts, both Indian and British, by circulating widely in India a comprehensive Questionnaire, which invited both information on points of fact and constructive suggestions for improvement. The subjects covered by this included the education of women; health measures; rural and industrial welfare schemes; the problems of early marriage, purdah, the position of widows; women's franchise rights, and the representation of women on governing bodies—in short the main questions with which the women's movement of to-day is occupying itself in India.

The response to this Questionnaire was encouraging and helpful, and we wish to express our gratitude to those in India who contributed their time, labour, and constructive ideas.

Much invaluable and generous help has been given to the Committee by those with long experience of India who are at present in England. We are specially indebted to the following, who although not in any way committed to the views expressed, have been good enough to read some of the script and to make valuable suggestions: Mr. A. Yusuf Ali,¹ the Rev. Herbert Anderson, Dr. Margaret Balfour, Mr. Philip Cox,¹ Lady Hartog, Dr. Harold Mann, Mr. J. A. Richey,

¹ In connexion with the legal status of women.

C.I.E., the Rt. Hon. V. S. Srinivasa Sastri, C.H., Mr. C. F. Strickland, I.C.S., Mrs. Underhill (Starr), and Mr. R. A. Wilson, I.C.S. We also wish to thank those Indian ladies (preferring to remain anonymous) who read certain chapters of the book, and made recommendations to the Committee.

In a work which deals with so wide a range of subjects and aims not at originality but at being a compendium of expert opinion, considerable differences of view will necessarily be represented. It must be made clear that contributors and those quoted are responsible only for the statements of fact or opinions which they have themselves expressed, and that they have no responsibility for those of other writers. The National Union of Societies for Equal Citizenship has sponsored the book, but cannot of course hold itself responsible for the opinions expressed in it. The survey was initiated and inspired by Miss Eleanor Rathbone, one of the best known leaders of the women's movement in Great Britain, although later, when engaged in Parliamentary work, she resigned her position of Editor, to the great loss and regret of the Editorial Committee which has supervised the compilation of the handbook.

In order that British readers may better visualize the interrelation between the special problems affecting women dealt with in the Survey and general social problems in India, some background is necessary. But it has proved impossible, in the limited space at our command, to do more than indicate this background in briefest possible outline.

We realize that in this slight survey we are dealing with a sub-continent rather than a single country.¹

¹ The survey excludes Burma and deals only with British India.

India has an area of 1,800,000 square miles. It equals the area of Europe without Russia, and its provinces approximate roughly in size to the countries of Europe.¹ Its vast population of 320,000,000² persons exhibits perhaps as great a diversity of race as does Europe, and it is estimated that 222 distinct languages are spoken in the sub-continent.³

Again, in a country extending from equatorial to temperate regions, endless varieties of scene and custom as well as climate are to be found. Perhaps in no other country are such anachronisms to be seen or such cleavages of religion and of caste. India has been described as an 'ethnological pageant epitomizing the gradual growth of civilization'.⁴

The overwhelming preponderance of primitive rural conditions is another point which needs continual emphasis. India is essentially a land of small and isolated villages, and here lies the main difficulty in the task of the reformer.

If it were possible to produce a map or chart of the world showing the extent to which its female inhabitants have obtained human rights of an elementary kind, such as education, and the control of their own persons, lives, and services, as well as the achievement of political emancipation, the results so depicted would be startling. It would be evident that the movement for

¹ The Montagu-Chelmsford Reforms of 1919 instituted a system of dyarchy in the Provinces under which certain functions of Government were reserved under the control of the Governor while others were transferred to Indian Ministers. The main subjects dealt with in this book, e.g. Education and Public Health, belong to the latter category.

² Of British India 247,000,000.

³ *India*, Valentine Chirol.

⁴ *India. A Bird's Eye View*, Lord Ronaldshay, p. 7.

emancipation in its broadest sense, except in a few favoured countries, is in its infancy, and that the work it has yet to accomplish is stupendous.

In this country we are watching the dawn of this great movement in India, which is likely to have far-reaching repercussions upon the thought and progress of the East. The cause of women's emancipation has always been an international one, and in the case of British and Indian women the bond is still closer owing to the political relationship of the two countries. At the present time of political unrest there are those in India who are unable either to recognize British goodwill or the international implications of the advancement of women. On the other hand there are many Indian reformers and workers, both distinguished and unknown, who are grappling with realities and who welcome the interest of British fellow workers. To these we would express our warm sympathy and our desire to add some impetus to the forces already at work. The women's movement in India has a gigantic task before it; we hope and believe that it will have a wonderful future. If any better understanding by British readers of the position and aims of Indian women results from this handbook its existence will be justified.

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I

EDUCATION

By H. GRAY, M.A.

PART I

AT the present critical stage in the development of Indian institutions it would be difficult to over-estimate the importance of the education of women. They are needed in every department of the national life. A literate woman is a securer guarantee of the education of the rising generation than a literate man. Women have been enfranchised in all the nine major provinces, and if the electorate is to be intelligent they, as well as the men, must be educated. The Health and Educational Services are seriously hampered for want of the intelligent co-operation of women, both as citizens and home-makers, and also as professionally equipped teachers, nurses, and doctors.

The need for women's education is widely acknowledged, and the demand is increasing in volume and sincerity, but has not yet had time to be effective. Female literacy still stands at only 2 per cent. throughout India, although the fact must not be overlooked that there is much inherited tradition and culture apart from literacy.¹ The dualism between an educated manhood and uneducated womanhood (so far confined mainly to the upper classes) is, however, increasing rather than decreasing. During the last decade the disproportion in

¹ Vide *Interim Report of the Indian Statutory Commission*, 1929, p. 45.

the amount of public money spent on boys and that spent on girls has also seriously increased. In fact the urgency of the problem of educating girls is growing rather than diminishing.

Of the three main obstacles to women's education, apathy, early marriage, and lack of funds, the first has been vigorously attacked in recent years by public propaganda, and the second by the passing of the Sarda Act. Want of money is now perhaps the most formidable difficulty confronting an extension of women's education.

Table giving figures for literacy among men and women in 1921: ¹

<i>Province and female population in millions.</i>	<i>Percentage of literates.</i>	
	<i>Men.</i>	<i>Women.</i>
Madras (21 million women)	15·2	2·1
Bombay (9 „ „)	14·1	2·5
Bengal (22 „ „)	15·9	1·8
United Provinces (21 million women)	6·5	0·6
Punjab (9 million women)	6·7	0·8
Burma (6 „ „)	44·8	9·7
Bihar and Orissa (17 million women)	8·8	0·6
Central Provinces (7 „ „)	8·4	0·7
Assam (3 million women)	11·0	1·3
British India (120 million women)	13·0	1·8

‘In 1921 less than one woman in fifty in British India could read and write, and progress in literacy both for men and women had been slow. In the ten years, 1911–1921, the increase in the percentage of those who could read and write was 1·7 for men, but only 0·7 for women.

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 145.

Thus, up to 1921, the disparity in literacy between men and women was increasing. We can have no further direct and definite information on this point until the Census of 1931.¹

'Between 1922 and 1927 the increase in the number of girls under instruction was 400,000, a very substantial increase, but the increase in the number of male pupils was 2,400,000; thus the difference between the number of boys and girls at school, already great, was increased by two millions. In no province does one girl out of five attend school; in some provinces not one out of 20 or 25.'² Throughout British India the figure for boys attending schools is 4 times as high as that for girls in

*Institutions for Girls.*³

	<i>Primary Schools. 1927.</i>	<i>Secondary Schools. 1927.</i>	<i>Colleges (Special Institutions not given). 1927.</i>	<i>Institutions (including special Institutions). Total Total 1917. 1927.</i>	
Madras	3,399	99	7	1,815	3,579
Bombay	1,535	87	—	1,216	1,666
Bengal	14,612	112	7	9,566	14,780
United Provinces	1,580	219	5	1,236	1,845
Punjab	1,232	114	3	1,030	1,388
Burma	606	141	—	1,083	779
Bihar-Orissa	2,790	32	1	2,561	2,848
Central Provinces	334	61	—	365	404
Assam	409	37	—	357	450
British India (girls)	26,682	965	26	19,365	28,001
British India (boys)	162,666	10,373	213	—	—

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 145.

² *Ibid.*, pp. 147, 148.

³ *Ibid.*, p. 146.

primary schools; 18 times as high in middle schools; and 34 times as high in high schools. In arts colleges there are 33 times as many men as women, i. e. 64,000 men and 1,900 women.¹

It must be remembered that many girls attend boys' primary schools, and women go to some men's colleges.

Recent Progress in Women's Education.

The most hopeful feature of the situation is the fact that leading Indian men and women have come to realize that national prosperity and the place they desire India to occupy among the advanced nations of the world depend on the women as well as the men of India becoming educated.

All members, including the three Indians, of the Hartog Committee (1928-9), have even gone so far as to claim priority for girls' education. 'We are definitely of the opinion that in the interest of the advance of Indian education as a whole, priority should now be given to the claims of girls' education in every scheme of expansion.'²

Other opinions on the general position as regards women's education may also be quoted:

'None can realize more fully than educated women that education is the great social problem of India, and that until female education has made up a great deal more of the leeway which it has lost under the restraints imposed upon it by Indian social traditions, India cannot attain to the place to which she aspires as a modern nation.'³

¹ Cf. *Interim Report of the Indian Statutory Commission*, 1929, pp. 147, 148.

² *Ibid.*, p. 183.

³ *India*, V. Chiról, 1926, p. 152.

Current Opinions on the Recent Growth of Women's Education.

'In the matter of women's education the progress made during the last thirty years has been little short of marvellous. It is a remarkable fact that while, during and since the War, there has been, owing to the economic stress, some retardation in the advance in men's education, these causes have had little effect in checking the steady growth of the girls' education.'¹

'There was a time when the education of girls had not only no supporters but open enemies in India. Female education has by now gone through all the stages—total apathy and indifference, ridicule, criticism, and acceptance. It may now be safely stated that anywhere in India the need of education for girls as much as for boys is recognized as a cardinal need of progress—a *sine qua non* of national progress.'²

'It is pleasing to watch the signs of the general awakening of interest throughout the country in the cause of the advancement of women. . . . In the field of education, especially higher education, there have been some brilliant achievements in individual instances. But stray individual achievements, however brilliant, cannot make up for the lack of general and well-ordered advancement of the women of the country in the matter of primary and secondary education.'³

'And the growth in the standard of education has been even more remarkable than the growth in numbers. In 1823 girls were only taught to read and write

¹ *Sister India*, K. Natarajan, p. 160.

² Rani Sahib of Sangli. *Report of All-India Women's Conference*, 1927, p. 13.

³ H.H. Maharani Sahib of Baroda. *Report of All-India Women's Conference*, 1927, p. 18.

and do simple accounts. In 1923 large numbers had taken the B.A. degree at the University. The results in the University examination are astonishingly good, far better in proportion than those in the colleges for men.¹

Difficulties Retarding Girls' Education.

To pass from the recent ripening of public opinion on the subject of women's education to some of the reasons which have hitherto retarded it and still have to be overcome.

Poverty and Sparseness of Population.

The fact that 87 per cent. of Indian girls live in villages is so closely connected with the almost insuperable financial obstacle to education that the two points must be considered together. The main obstacle in the way of the extension of education in India is finance. India is a land of villages. These villages are too small to support a school with even one well-paid teacher. Over 360,000 villages have less than 500 inhabitants, and their aggregate population is over 70 million.² (The average number of children in an Indian primary school is 42.) We must further take account of the fact that most villages consist of two separate units—the caste people and the outcastes—who cannot be treated as one group—and a further multiplication of schools is necessary to meet the requirements of the several languages and communities.

So far the outcaste children have not been able to sit side by side with the caste children, and this up to date

¹ *Indian Problems*, Bishop Whitehead, 1924, p. 185.

² *Interim Report of the Indian Statutory Commission*, 1929, p. 37.

enormously increases the difficulty in educating the masses, and will continue to do so, as long as caste is maintained as the basis of Hindu society.

Caste and Language Problems.

‘At present there are vast arrears to be made up. The number of schools would have to be increased fourfold at least to provide one school for each village. But unless the caste system disappears, two schools will be needed in each village.’¹ Add to this the difficulty that, as soon as the group is somewhat enlarged in small towns or large villages, a clash of languages arises. The children cannot even be taught the same alphabet during the one year which the majority spend at school. In Bombay city there are said to be 68 living languages used by considerable groups.

Wasteful Expenditure on Voluntary Education.

Dr. Whitehead is convinced that dearer schools would in the end prove cheaper.

‘It may sound a paradox, but I believe it is true to say that the people will not and cannot pay for the existing type of schools costing Rs. 30 a month, but could and would pay for community schools that would cost Rs. 60 or Rs. 70 a month; for the simple reason that the cheaper schools would be of little or no use to them; while the more expensive schools would considerably add to their wealth. And from the point of view of the Government, it would be a far better investment to pay double for really good schools that would promote the moral and material progress of the people, than to cover the country with schools that are cheap and ineffective.’²

¹ *Indian Problems*, Bishop Whitehead, 1924, p. 153.

² *Ibid.*, p. 169.

Compulsory Education in the end less costly.

Closely akin to the problem of finance is the question of compulsory versus voluntary attendance at school, because the voluntary system is voted 'unbearably costly'. By 1917 it had become clear that any further advance on a voluntary basis must be as wasteful as it was slow. Lord Curzon (between 1912-17) with dynamic energy fired his educational officers with zeal to spread 'a net-work of schools throughout India'. Everything possible was done to stimulate a desire for education.

'But in vain was the net spread. The figures for 1912-17 showed a record increase in the number of institutions, but also a serious and significant fall in the number of pupils per institution, or a decline in the rate of increase of pupils. It became clear that there had been for some years past sufficient schools for all those in India who by occupation and tradition required them. The existing demand had been met. . . . Attendance became more irregular and scholastic results more unsatisfactory. The authorities were at last face to face with the real problem of mass education. In the absence of any demand for more schools and with no powers of compulsion, further progress must become each year more slow, more costly and less effective. . . .'¹

The unbearable cost of a voluntary system is referred to by other authorities.

'Let it be said once again that compulsion means economy, and that by its enforcement the large sums of money now devoted to vernacular education should be spent to better purpose. The effect of compulsion is

¹ *The Education of India*, A. Mayhew, C.I.E., p. 232.

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very largely the filling up of the sparsely attended upper classes of a primary school.' ¹

Difficulties peculiar to Girls' Education.

The difficulties referred to above, namely, the sparseness of the population in small villages and the consequent heavy cost of education, applies as much to boys as girls. Causes militating specially against the progress of girls have now to be considered.

'Owing to social and other causes, the compulsion for girls to attend schools presents very special difficulties, and in consequence only in five provinces have girls been included in the scope of compulsory legislation.' ² (Of these five only two have actually applied compulsion, i. e. Madras, in all the city wards, and Bombay, in four wards.)

'The spread of literacy amongst men only will do little to secure the atmosphere of an educated and enlightened home, and the existing disparity between the outlook of the man and the woman will only be increased. National and social reasons all point to the necessity of adopting, wherever possible, the same policy for boys and girls.' ²

The Punjab is the only province which is so far converted to the view that compulsion is, in fact, more economical and effective than a multitude of voluntary schools in which 72 per cent. of the boys, and still more of the girls, never even reach the second class. It is far sounder to teach a smaller number of children and get some result, than to teach a larger number and get absolutely no result.

¹ *Punjab Report on Education*, 1927, p. 9.

² *Interim Report of the Indian Statutory Commission*, 1929, p. 171.

Unfortunately girls are not included in the compulsory system of the Punjab, which contains 1,500 out of the 1,571 rural areas under compulsion throughout India. It is greatly to be regretted that, when a new force like compulsory education is revolutionizing village life, the girls should have been shelved. It will create a schism in outlook between husbands and wives hitherto absent from village life, where the men have been almost as illiterate as the women.

Outside the Punjab and Central Provinces, compulsory education either for boys or girls is practically nil in rural areas, though all the provinces have accepted the principle. But 'it seems clear that a mere enabling statute will not provide any guarantee for the speedy and widespread application of compulsion.'¹

'In our opinion the responsibility for mass education rests primarily with the State; and the provision of educational facilities for all classes of the community and for all areas should not be left entirely to the mercy of local authorities.'²

On the other hand, there are many necessary preliminaries to the application of compulsion.

'In many places a drastic reorganization of the elementary system should precede it, for an impetuous and ill-considered application of the principle would inevitably result in much unprofitable expenditure and even an accentuation of many of the present evils. To compel children to stay in ineffective, ill-equipped and badly-staffed schools can only result in serious addition to the existing waste.'³

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 86.

² *Ibid.*, p. 87.

³ *Ibid.*

Wastage.

Throughout India the diminution in enrolment of girls from Class I to Class II, from Class II to Class III, &c., is enormous. In Class IV (the lowest class in which it is estimated that permanent literacy may be won) there are only on an average two girls in every school.¹

In Bengal it takes three schools to produce one literate girl.² It is estimated that in the years 1922-5 'the total loss for the 4 years amounted approximately to Rs. 14.4 crores or to 60 per cent. of the total expenditure on primary schools.'³ For girls alone the percentage of money entirely wasted would have been greater still.

These figures indicate that the quantitative advance in enrolment and expenditure during the last decade is not being balanced by a qualitative advance, measuring quality by the attainment of literacy.

Every authority agrees that educational money is being wasted, because the foundation (none too well laid) receives no superstructure. In the Punjab, at the moment the most progressive province in India educationally, one in every two boys drops out before reaching Class II of the primary stage, and three out of every four girls. The figures are:

	<i>Class I.</i>	<i>Class II.</i>
Boys	393,266	165,735
Girls	47,295	12,374

And these 12,374 little girls have dwindled away to 173 before reaching what in England would be the end of compulsory education. It is obvious that the

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 167.

² *Ibid.*

³ *Ibid.*, p. 48.

voluntary system, with its deadweight of starters who never run the course, is a wasteful method of spending the scanty funds at the authorities' disposal.

*What should be the Next Steps in Compulsory
Education for Girls ?*

It is commonly held that compulsory education for girls, though ultimately desirable, is at present 'quite impossible', 'would be unenforceable', 'would remain a dead letter',¹ the local bodies acting in their capacity of 'educational authorities are unwilling to incur the odium of enforcing it even in the case of boys'.²

Several women's societies³ think that compulsory education for girls should be tried first in towns and selected semi-rural areas where the population is progressive in outlook.

One of the main reasons given for not pressing forward compulsory education for girls is the want of teachers. As there is already a great dearth of teachers for the existing schools, it is imperative that more training facilities should be provided before compulsion can be attempted on any considerable scale. As an example of the danger of making compulsion permissive, before teachers are available, one correspondent describes a school 'where 70 children aged six to seven are taught by one incompetent woman in a single ill-ventilated, ill-lighted room, without any apparatus.'²

Thus the provision of women teachers must precede the enforcement of compulsory education for girls.

¹ Inspectress of Schools, Nagpur. Answer to questionnaire sent by Women of Indian Survey Committee.

² R. A. Wilson, I.C.S. Answer to questionnaire.

³ Delhi Women's Council. Bombay Presidency Women's Council. Central Social Service League, Delhi.

Co-education.

'Opinion appears to be sharply divided as to the possibility or desirability of adopting or extending the system of co-education. Even in Burma, where co-education exists much above the primary stage, there is a strong demand for more separate girls' schools. In Madras a recent conference of women officers agreed that "co-education was not objected to by the backward classes, or by the educationally advanced, but that there was a strong feeling against it in the middle classes".'¹

*Women Teachers.**Scarcity of Women Teachers.*

In all countries where there is mass education, small children (boys and girls) and older girls throughout their school lives are taught mainly by women. But in India the necessary army of women teachers does not at present exist. No western country has ever had to face the problem of compulsory mass education relying entirely on men. The education systems of England or America would break down to-morrow if women were not available. But the existing social systems in India (Mohammedan and Hindu) make it difficult for unmarried women to live alone in villages, though the difficulty has been exaggerated and in some places is decreasing. Official reports from every province in India still speak of 'almost insuperable difficulties', the 'all but desperate hope' of obtaining women teachers.

'The almost insuperable difficulties which militate against an adequate supply of women teachers are well known and are immensely serious for the welfare of the

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 169.

country. All primary school work in villages is pre-eminently women's work, and yet the social conditions are such that no single woman can undertake it. . . . The lack of women teachers seems to be all but insuperable, except as the result of a great social change.' ¹

*Number of Training Colleges for Women in 1927, and Enrolment.*²

	Colleges.	Students.
Madras	2	41
Bengal	3	41
U.P.	1	6
Punjab	1	27
Total	7	115

Five of these colleges are missionary institutions. Of the 115 students, 98 are Christians, 15 Hindus, and 2 Mohammedans.²

Number of Training Schools for Women and Enrolment in 1917 and 1927.

Province.	Training Schools.		Pupils.	
	1917	1927	1917	1927
Madras	25	37	832	1,831
Bombay	17	18	713	666
Bengal	10	10	141	201
United Provinces	24	34	208	316
Punjab	13	12	224	445
Burma	4	29	176	599
Bihar and Orissa	8	11	137	180
Central Provinces	3	6	107	228
Assam	2	2	27	36
British India	111	166	2,651	4,664 ³

¹ *Village Education in India. Commission of Inquiry*, K. T. Paul, 1922, p. 98. ² *Interim Report of the Indian Statutory Commission*, 1929, p. 177.

³ *Ibid.*, p. 178.

In 1927 fifty-four of the training schools were managed by Government and the majority of the remainder were under mission management.

The three main reasons causing a shortage of women teachers are:

- (1) The lack of training facilities, and of young women sufficiently educated to profit by training.
- (2) The difficulty of getting women trained in towns to teach in villages.
- (3) The inadequacy of the pay, and unpopularity of teaching as a career.

Frequent reference has been made to the difficulty of securing for women teachers satisfactory conditions of service and pay.

Inadequate Pay of Women Teachers.¹

The average monthly pay of all teachers in boys' and girls' primary schools is as follows:

	Rs.		Rs.
Madras	15	Punjab	25
Bombay	47	Bihar	11
Bengal	8	C.P.	24
U.P.	18	Assam	14

'The figures show that the average monthly salaries in some provinces are almost incredibly low, especially when it is borne in mind that they cover all kinds of schools, . . . the head teachers in city schools as well as the assistant teachers in village schools.'¹

Women living alone in Villages.

Under the above heading it is important to notice that there are now two opinions as to the feasibility of women living alone in Indian villages. Whereas till

¹ *Interim Report of the Statutory Commission, 1929, p. 64.*

lately it was unanimously held to be inadvisable or even impossible, a younger and more forward-looking school of social workers now believes that this development must come, and that the risk is a diminishing one.¹

‘On the N.W. frontier, in half-a-dozen places, a young unmarried woman accompanied by an elderly chaperon is teaching in the village school.’² Others say that it is possible for an unmarried woman or a widow to live alone, if she is (a) well known in the village, (b) elderly and of approved character, (c) frequently visited by the society for which she works.

On the other hand, the majority of experienced workers still think it is impossible for an unmarried woman or widow to live alone in a village. ‘Any one who makes an assertion to the contrary does not know the condition of our villages. The difficulty can only be overcome by letting them live with male relatives or under the protection of a mission, or in a Seva Sadan compound. The solution of a male relative is the best.’³

There is a general consensus of opinion that the village schoolmistress or ‘guide’ could not combine teaching of the three R’s with the duties of a health-visitor or nurse, though the schoolmistress should have hygiene as one of her principal subjects, e.g. ‘I am against primary education unless the teaching of hygiene is made compulsory at the same time.’⁴

¹ Dr. Commissariat. Answer to questionnaire.

² Inspectress of Schools, North-West Frontier. Answer to questionnaire.

³ Parliamentary sub-Committee of the Bombay Presidency Women’s Council. Answer to questionnaire.

⁴ Director of Public Instruction, United Provinces. Answer to questionnaire.

Training.

Should educational and social service leaders be trained in Europe or in India?

There is a sharp cleavage of opinion on this point, between (1) those who object to training in Europe on the ground that it is

- i. expensive;
- ii. unsettling;
- iii. turns out only a very limited number of workers;
- iv. demands an English-language qualification which is a waste of time for rural workers;

and (2) those who believe in training in Europe on the ground that

- i. the facilities for training are better in Europe than in India;
- ii. the trainees get a wider outlook and more self-confidence as a result of travel.

On the whole Indians are in favour of a European training, and British women advocate an Indian training.

It is generally admitted that some British women are still needed in India, and that if they withdrew now the pace of reform in India would be retarded. There would, in fact, be a serious shortage of persons qualified to train the Indian women who are coming forward in increasing numbers. But the situation improves every year, as more and more Indian women become qualified to train others. The Seva Sadan is the outstanding example of a purely Indian activity in this direction.

*Curriculum.**Want of Goal in Girls' Education.*

It is not so much the view that 'education is unbecoming the modesty of the sex', as the view that education is entirely futile and has no bearing on home life which must to-day be combated. And who could deny that a year, or perhaps two, spent in parrot-like repetitions of meaningless words, is an absolute waste of time? Even as a crèche (the usual use to which primary schools are put) the primary school is hopelessly unattractive. There is none of the apparatus little children love, no sand-heaps, coloured books, chalks, or hand-work; only an abracadabra of sounds and signs leading nowhere. It is 'a tale told by an idiot signifying nothing'.

Early Marriage.

Over the middle and high schools, where literacy at least might be attained, purdah and early marriage have cast their long shadows. Even in England an unceasing battle wages as to whether girls should be taught on the same lines as boys. For English girls marriage is remote, perhaps a state never to be reached. For Indian girls it is a near certainty. Obviously education should bear that fact in mind. If the Indian boys' education has so far been divorced from the inner recesses and permanent values of life, still more is girls' education divorced from them. No wonder the vast majority of girls, even of those belonging to the learned castes, fade out of the picture long before the colours can be filled in. These puzzled players in a meaningless drama 'fret their hour upon the stage and then are seen no more'.

Finance.

The figures of the decade 1917-27 show that, 'though there has been a definite quantitative advance in girls' education, the public expenditure is still small compared to that on boys; and the disparity in the amounts spent on the two is increasing, notwithstanding the fact that girls' education is necessarily more expensive than that of boys; and as a consequence there is a growing disparity between the number of educated men and educated women.' ¹

Percentage of total government expenditure on education allotted to institutions for boys and girls respectively.²

<i>Province.</i>	<i>Boys.</i> %	<i>Girls.</i> %
Madras	67	12
Bombay	73	15
Bengal	62	8
U.P.	67	5
Punjab	64	6
Bihar and Orissa	44	3
C.P.	55	5
Assam	62	6

In considering the above figures, it must be remembered that in every province a certain proportion of girls at the primary stage are taught in boys' schools (about 8 per cent. in the Punjab, 55 per cent. in Madras). The annual cost per annum per pupil also varies enormously in the different provinces, from Rs. 26 in Bombay,

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 150.

² *Ibid.*, p. 263.

to Rs. 3 per annum in Bengal. This extraordinary figure for Bengal is due to the fact that in Bengal many of the girls' schools are run as a subsidiary industry by the teachers of boys' schools. 'The apparent economy in Bengal really conceals much inefficiency.'¹

It is not without significance that in the four provinces where female literacy is lowest the percentage of government expenditure on girls' education is also the lowest.

The average direct cost of educating a girl in a primary school is at present about Rs. 11 per annum. The corresponding figure for boys is Rs. 8. There are about 15,136,000 girls of school age who are not in school and for whom provision should be made. If 80 per cent. of these 15 million girls were brought under instruction, along with the 10 million boys who also are not attending school, then the total recurring cost would be approximately Rs. 19·5 crores. The Hartog Commission are of the opinion that at least some of the wealthier Indian provinces could meet this heavy additional expenditure.

'Making full allowance for a considerable increase in inspection and training, we think that the estimate of Rs. 19·5 crores recurring is not likely to be exceeded and may even be reduced. In addition there will of course be a heavy expenditure on buildings and equipment. But the total cost to be raised is not abnormally large, and with a well-devised programme, spread over a period of years, the goal of almost universal compulsion should be within the reach of at least the wealthier provinces of British India.'²

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 265.

² *Ibid.*, p. 271.

Financing Girls' Education.

The difficulty of finding money for rural education is the most insuperable of all the difficulties retarding the progress of girls' education. Some Indians ¹ think it would be possible to divert considerable sums invested in temples and charitable endowments to girls' education. 'The only way to stimulate private charity for the purpose of education is to divert the existing charities for the indiscriminate feeding of mendicants into proper channels.' ²

Most correspondents dwell on the extreme difficulty of raising funds by voluntary subscription. But others think that money might be collected from castes or communities which would be unobtainable on non-community lines.³

Most women, however, rely on the redistribution of sums already allocated to education, arguing that, as women have so much lee-way to make up, a larger proportion than has hitherto been the case should be earmarked for girls. Since the Hartog Commission says that 'priority should now be given to the claims of girls' education in every scheme for extension' their recommendation would involve the spending of a larger proportion of Provincial and Local Government resources on girls' schools.

Education, a National not a Provincial Service.

The result of the 1921 Reforms has been to throw far more of the responsibility for education on the provincial Governments, who in their turn have largely

¹ Delhi Women's Council.

² Bombay Presidency Women's Council.

³ Inspectress of Girls' Schools, North-West Frontier. Dr. Commissariat. Supt. Medical Aid to Women, United Provinces.

abrogated their powers to local bodies. It might have been expected that great care would have been taken to instruct these ignorant and often indifferent bodies in the fresh responsibility laid upon them. Such has not been the case. Few provinces have any well-directed scheme for overcoming the wastage in primary schools due to loss of most of the pupils before they can become literate or for overcoming the backwardness of women. Even in the large towns, with the exception of Madras and Bombay, municipalities have not applied compulsion, though they have passed enabling Acts. Even where many new schools have been opened, 'the vast increase in numbers produces no increase in literacy. . . . In one province despite a very large increase in the number of primary schools the number of pupils who attained literacy was actually less by 30,000 in 1927 than it was ten years before.'¹

The Hartog Commission is very emphatic on this point: 'The formation of an educated electorate is a matter for the nation'² . . . 'We are of the opinion that the divorce of the Government of India from education has been unfortunate; and holding as we do that education is essentially a national service, we are of the opinion that steps should be taken to consider anew the relation of the central Government with the subject.'² 'The reconstruction of the provincial educational services can suffer no delay'.³

Control of Education.

The responsibility for education has been transferred since the Reforms to the provincial governments. The

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 345.

² *Ibid.*, pp. 346-7.

³ *Ibid.*, p. 347.

Minister for Education in each province is now responsible for controlling policy and directing its execution. But owing to the political situation since the Reforms the tenure of office by Ministers has often been short and precarious.

The permanent administrative head of the department is the Director of Public Instruction. He is the expert adviser to the Minister and takes his place beside him in the Legislative Council. The population with which he deals varies from 8 to 46 millions. For the framing of plans and, above all, in all that concerns girls' education, the Director needs expert advice, since the Director himself has only rare opportunities of visiting girls' schools and many of these he would never be allowed to visit. Yet only in three provinces, Madras, Punjab, and Bihar, is there a woman in high position, of experience and authority.¹ The directress of policy, who should be the eyes and ears of the Minister for Education, is non-existent in six provinces. It is not to be wondered at that, relatively to boys' education, that of girls is losing ground steadily, and that the neglect to provide directing staff is leading not to economy but to waste.²

The work that should belong to the non-existent Directress falls on the over-worked and under-paid inspectresses, with the inevitable result that there is everywhere an absence of policy adequate to cope with what report after report, and commission after commission, has declared to be the crux of progress and enlightenment in India, i.e. the education of women.

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 288 and chap. xvi *passim*.

² *Ibid.*, p. 290.

Women Inspectorate.

In some countries where the teachers are trained, well educated, and keen about their profession, it is conceivable that inspection might be looked on as a luxury. In India this is not so. 'Every one acquainted with the educational system in India is aware of the flaws in schools which are rarely inspected. In some cases they become periodically evanescent and in others, so we are told, they cease to exist except for the purpose of receiving a grant payable to a teacher who gives no instruction.'¹ . . . 'We cannot too strongly emphasize the fact that so long as the provincial governments are responsible for educational policy and contributing so largely to the financing of mass education, an adequate inspecting staff is not only essential but actually economical.'²

In no branch of education is helpful inspection more needed than in the education of girls. The inadequacy of inspection in boys' schools is great; in girls' schools it is far greater.

In no province has an inspectress less than 4,000 square miles to cover; in several she has over 8,000; in a few much more than 8,000. 'We have been much impressed with the evidence which is almost universal that inspectresses should tour widely, often in difficult and not always safe places, and that their encouragement is much appreciated by lonely girl teachers. . . . A further increase in the inspecting agency is essential for the growth of girls' education.'³

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 306.

² *Ibid.*

³ *Ibid.*, pp. 160-1.

Women on Educational Boards.

There are many boards on which women might be represented, such as district boards, municipalities, and the managing boards of secondary schools and of colleges. But they are generally conspicuous by their absence. Four women are elected to the Bombay Corporation, but Madras is alone in having adequate representation of women in the various departments of education from primary schools to the university.

Yet there can be no doubt that women are badly needed, not only to evolve a policy and curriculum suitable to girls, but also in the appointment of teachers and to keep an eye on premises and equipment.

Premises and Equipment.

The premises and equipment of the primary schools are as a rule poor. Some inspectresses complain bitterly that the girls only get a school building when it has been condemned as unfit for boys. This is not surprising in the villages, where many of the girls' schools enjoy but a precarious existence. But in the towns, where the supply of girls is fairly constant, conditions are generally worse, owing to overcrowding. Playgrounds are small or non-existent. The health and physical development of girls is of the first importance to the race, yet for 20 years the numerous and for the most part cramped high schools of Bombay Fort have been trying in vain to secure one solitary playing-field for girls. There are, however, in some parts of India 'a number of large schools with suitable accommodation and adequate

playgrounds. But the condition of schools generally is not satisfactory.’¹

Broadcasting.

The answer to the question whether broadcasting can be made educationally useful is an almost unanimous ‘No’. The objections are

1. Insuperable language difficulties on account of the multiplicity of tongues.
2. No demand.
3. In many places no possibility of paying for receivers.
4. Impossibility of supplying programmes with a wide appeal.

In fact the radio as an educational tool is such a remote contingency as to be negligible.

Cinema.

Magic lanterns and the cinema are already to a certain extent educationally useful in towns, and ‘can be taken round on demonstration wagons and trains.’² ‘We already use the cinema to the greatest extent our resources allow.’³ ‘The cinema is rapidly becoming popular, and parties can be sent out into the Mofussil with the assurance that they will attract audiences, and be welcomed. This is again a question of funds.’⁴

¹ *Interim Report of Indian Statutory Commission*, 1929, p. 175.

² Delhi Women’s Council. Answer to questionnaire.

³ Director of Public Instruction, United Provinces. Answer to questionnaire.

⁴ Director of Public Instruction, Bombay. Answer to questionnaire.

PART II

EXISTING AMELIORATIVE AGENCIES

To contend with the difficulties besetting women's emancipation there exist in every province in India three agencies:

The Government.

Christian Missions.

Indian Philanthropic Societies.

Government has made timid efforts to help in the enlightenment of Indian women. Finding that throughout the length and breadth of the land there reigned a profound distrust of education for women, and possessing but small resources for educating any one, the Government followed the line of least resistance and did not spend money where it was not demanded. The Indian public cannot fairly reproach the Government for not thrusting down its throat a cure for social backwardness against which Hindu and Mohammedan society was equally and bitterly in revolt.

It was not the Government but the missionaries who boldly attacked the problem of girls' education.

In 1927 out of 315 girls in Medical Colleges 219 were Christian, 95 non-Christian.

In 1927 out of 115 girls in Training Colleges 98 were Christian, 17 non-Christian.

In 1927 out of 1,254 girls in Arts Colleges 721 were Christian, 533 non-Christian.

That is to say, the tiny Christian community (less than five million out of three hundred and twenty million) still furnished in 1922-7 a majority of women in the professions.¹

¹ *Quin. Report*, 1922-7, vol. ii, pp. 28, 30.

Throughout the latter part of the nineteenth century Indian groups, especially Brahmo-Samajists and Parsees, founded schools for girls. Some of these schools have been in existence for half a century (the Bethune College was founded in 1849), and have done very good work, but they still touch only a fringe of the problem. It is a little vital spring, but hardly wider to-day than it was at its source many years ago.

Since the different provinces have widely divergent needs and circumstances, it will be most convenient to give at this point some idea of various provincial efforts. No attempt is here made to give a complete list even of the outstanding institutions; a few well-known schools and colleges are selected simply in order to give an idea of the complexity of the problem.

MADRAS

Absence of Purdah.

The outstanding characteristics of Madras are absence of purdah and a much wider diffusion of Christianity than in any other province. This has given women, especially of the lower castes, greater opportunity here than elsewhere in India. It is in Madras that mass movements towards Christianity have taken place, and wherever Christianity spreads, women have a better chance.

It is not surprising, therefore, to find a far larger proportion of girls in high schools here than in any other province. Bengal, with nearly 100,000 more girls in its primary schools, has only half as many as Madras in the high school stage. Madras leads, too, both in the number of women's colleges and of its women students.

On the other hand, in spite of these advantages Madras has been supine as regards indigenous efforts, and has done little for girls except under missionary or government stimulus. Less here than in any part of India have Madras men endowed schools where distinctively Indian ideas could be tried out. Madras men complain bitterly that the girls are denationalized, but they have done little to provide alternatives.

Madras has, however, always been fortunate in the outside help it has attracted, and now possesses the premier women's college in India, in respect of equipment and buildings; perhaps not in these alone.

The Women's Christian College.

The Women's Christian College, Madras (founded 1915), is still young, but is nobly planned, and is already realizing some of its high aims. It is supported by twelve missions and 'thus represents inter-denominationalism and international co-operation to a fuller extent than has hitherto been known, even in South India, where there have been exceptionally successful examples of such co-operation'.

St. Christopher's Training College.

A daughter college of the Women's Christian College has already sprung up, and in it, too, the great aim is to foster the sense of vocation, this time among teachers.

The Queen Mary Government College.

Besides these two missionary colleges, Madras has a well-equipped Government college (opened 1914), the Queen Mary College, into which women are flocking. This shows that when opportunity under congenial

surroundings, not far from their own homes, is offered, Indian girls, especially Christians, eagerly avail themselves of higher education.

WESTERN INDIA

BOMBAY

The west of India has always been *facile princeps* as regards indigenous efforts. This is no less true of social reform than of girls' education. It is due both to the presence of Parsees, here and here only in India, and to the Mahratta vigour and initiative.

'The cause of women's education and the uplift of women is nobly assisted by numerous societies and institutions in this Presidency, chief among whom are the Seva Sadan, Poona, and the Indian Women's University, Poona, and the Vanita Vishrams, at Bombay, Ahmadabad and elsewhere.'¹

The best of all tests of a community's belief in the higher education of women is the number of schools they have started to promote it. Of such high schools, in 1913, Madras had none, Calcutta two (both Brahmo), Bombay ten (eight of them founded by Parsees).

Widows.

Another indication of a community's interest in its women is its care for widows. Now that the joint family system is breaking down, even in orthodox Bengal, the outlook for widows is sombre; their maintenance and protection within the family is falling into abeyance, and the provision made for their training becomes, therefore, a test of a community's public spirit. It is again Western India that comes to the front.

¹ *Report of Progress of Education in Bombay, 1925-6*, p. 74.

Dr. D. K. Karve's Widows' Home and University.

(Official Title, *The S. N. D. Thakersey Indian Women's University.*)

Dr. D. K. Karve, an orthodox Hindu reformer, has for thirty-five years been carrying on his work in Poona unaided by Government. In the days when the education of widows, vernacular education, and the placing of women teachers in villages were all looked at askance, Dr. Karve ventured down each of these dangerous paths in his search for the emancipation of women.

Without encouragement from any quarter—for the progressive thought vernacular education reactionary, and the orthodox shunned his widows—this brave champion of women's emancipation pursued his lonely course. Even to-day his University (founded 1916, endowed and named after S. N. D. Thakersey in 1918) is small; it has turned out only forty-two graduates since its foundation,¹ but it is in every way a remarkable effort in independent thought.

Pandita Ramabai Widows' Home.

Equally outstanding was the achievement of Pandita Ramabai in helping widows.

At the beginning of this century when the vast city of Calcutta was supporting only 30 Bengali widows, this remarkable woman was solely responsible for 1,500–2,000 widows in a village which she had built outside Poona. There is no more startling achievement in the annals of philanthropy than the work of Pandita Ramabai. Her life was one long adventure. She was alone, for as an Indian Christian she was cut off from

¹ *Progress of Education in India, Quin. Report, 1922–7, p. 160.*

her Brahmin relations, yet she built up, out of nothing, an edifice of which any untrammelled philanthropist of the West, such as Dr. Barnado, might have been proud. Her village became largely self-supporting. No widow was ever rejected, and, as became the home of so learned a woman, work for the advancement of learning, e.g. translations and difficult printing in several languages, was part of the village output. It would be impossible in the face of such an achievement, and its companion effort in Poona, the Seva Sadan, to deny to Indian women great capacity for organization and sustained devotion.

The Seva Sadan.

The Seva Sadan, which is active both in Bombay and Poona, is training over 1,000 women, some to earn a living and so achieve independence, others as leaders of their more unfortunate sisters. It fosters ideas of social service and directs the philanthropic worker. The work is sound, and has stood the test of time, as it has twenty years of solid achievement behind it.

These three remarkable undertakings—Dr. Karve's Educational Institutions, the Seva Sadan, and Pandita Ramabai Widows' Homes—have passed out of the region of caste or community effort. They are for all India. In Western India, they are only the most outstanding among numerous efforts for helping widows and building up a happier womanhood, by means of education.

Parsee High Schools.

The Parsees have no less than nine high schools for girls, all of many years' standing, in Bombay city alone.

Bombay Primary Schools.

Among the few municipalities outside the Punjab which have adopted compulsory education Bombay is one, and it applies compulsion to girls as well as boys, an unusual course in India. In Bombay city compulsion has worked with unexpected ease; the children are summoned by 'call-boys' to schools located as close as possible to slum dwellings, and all the available space is soon filled up. As in most parts of India, an attempt is made to apply compulsion from the ages 6-10, thus giving the child a reasonable chance of lasting literacy.

BENGAL.

In Bengal 96 per cent. of the girls at school are in the primary stage.

In Chittagong only one Mohammedan girl in 13,000 survives the primary stage. The number of Mohammedan girls in populous Chittagong above the primary stage rose from two to five in five years, so that the inspectors are driven to the conclusion that 'the primary school provides a convenient nursery for young children rather than an educational institution. An overwhelming number never attain literacy.'

Bengal has not been fertile in ideas for girls any more than for boys.

Examinations have always been the curse of Bengal. A few years ago a well-considered, carefully prepared attempt was made to introduce into girls' schools a curriculum better adapted to the need of Indian girls, most of whom do not proceed to college. The experiment failed, because the parents were suspicious of the value of any training that did not lead direct to matriculation.

Arts Colleges.

Yet the three Arts Colleges of Calcutta do squeeze girls through their examinations. The Bethune College (founded 1849), which for two generations had a unique position as the only Government college for women in India, to-day passes nearly all its candidates successfully through matriculation. The two missionary colleges—the Diocesan and the Loreto—with slender financial resources, perforce bend to the popular demand, and pass their alumnae (successfully) through the needle's eye.

It must be remembered that any Indian school which can persuade a few of its older girls to stay on and sit for an examination ranks as a college. The Diocesan School has striven to give Bengali girls an education more in sympathy with the genius of the people. English is taught only as a foreign tongue, and the child hears there some of the stories and songs to which an Indian girl's heart can give answering vibrations, instead of wandering in a wilderness of alien ideas. But it has been uphill work.

The Bengal *Quinquennial Report* (1922-7) breathes depression on every page devoted to girls' education; it notes that, during the five years reviewed, one high school for girls has been started (eight out of nine girls' high schools in W. Bengal are in Calcutta); that

'Vernacular schools are declining in popularity and losing ground . . . that little has been done to improve the condition of primary education as a whole . . . in the nature of the buildings, the prospects of the teachers, the quantity and quality of equipment—there has been no marked rise of level.

'The demand for education which undoubtedly

exists, for girls as well as for boys, has not hitherto become to any large extent an effective demand; that is, a demand prepared to pay the price, whether in the nature of increased fees, private benefactions or local taxation. . . . Two individuals have started and maintained schools at their own expense. . . . But the general tendency is still to depend on Government for whatever money is necessary.’¹

‘The most significant event of the quinquennium was the Conference of the Bengal Women’s Education League, when educated women of all religions and races met. . . . That women have begun to talk and think of the education of women is perhaps the most hopeful feature in this chapter of our educational survey.’²

Yet admirable work for the advancement of women is being done by various bodies, including the committees working in conjunction with Lady Bose in Bengal. These committees run an up-to-date school in Calcutta containing nearly 400 girls, the *Brahmo-Balika Shikshalaya*, where a high level of scholarship is maintained, without sacrificing the physical culture and preparation for home life of the girls.

Even more remarkable are the twenty-three village schools run by the above committees, the *Widows’ Home for Training Teachers*, and the *School for Women’s Industries*.

All these efforts for the advancement of women in Bengal are warmly welcomed by the rural women. Only lack of space and lack of money prevent their rapid expansion. The houses, both for teachers (thirty inmates) and for the industrial school (fifty-four inmates), have been taxed beyond their due capacity. More village schools could be opened were teachers available.

¹ *Bengal Quin. Report*, 1922-7, pp. 88.

² *Ibid.*, p. 71

Another remarkable effort towards emancipating village women and kindling in them some demand for a fuller life is the Women's Institute Movement in Bengal described elsewhere.

PUNJAB

(1) *Compulsory Education.*

At the moment the Punjab is educationally the most interesting province in India.

'Compulsory education in rural areas is only alive in the Punjab. What is the reason for this? In the major provinces of India compulsory Education Acts were passed in 1918-20. To those who hoped much from these Acts, the history of the past ten years has been one of profound disappointment.'¹

In 1927, out of the 119 urban areas which had adopted compulsion, 57 were in the Punjab, 25 in the United Provinces, 21 in Madras, and 16 in the rest of India.² Out of 1,571 rural areas adopting compulsory education, 1,499 were in the Punjab.

(2) *Higher Education of Girls.*

At the opposite end of the scale a good deal is being done for girls. Lahore is unusually well provided with girls' high schools. The Punjab, though late in awakening, is now going ahead rapidly, and girls, instead of leaving their high school at twelve years, stay on till sixteen or even later, and an increasing number are going on to college.

Each of the Lahore schools deserves separate treatment, but here only the briefest statement about them can be made.

¹ J. A. Richey, C.I.E., late D.P.I., Lecture, 1928.

² *Interim Report of the Indian Statutory Commission*, 1929, p. 85.

Lady MacLagan School.

This school has 607 pupils, including 177 senior vernacular and 9 junior anglo-vernacular teachers under training.¹

The Victoria School.

The Victoria School has 702 girls.¹ Miss Bose was head mistress for over thirty years. This school is an indigenous effort, on sound lines, housed in an old Sikh Palace. Miss Bose has given her life to the school.

Queen Mary College.

This college was founded as a boarding-school for the daughters of chiefs. As sufficient of these did not present themselves (total of scholars = 135 in 1927), the school now accepts Government aid, and includes a certain number of the professional and merchant class. But the school is nevertheless an expression of the desire of high-born women for education. It was started partly by subscriptions raised by them, and in somewhat small numbers their daughters have attended as boarders. The head mistress and some of the staff are English-women. The surroundings and buildings are beautiful. Government now owns the school. The girls tend to work, sleep, and eat in two groups, Hindu and Moham-medan. The Punjab is remarkable in having several other boarding-schools as well as the Queen Mary.

The Sikh Kanya Maha Vidyalaya.

The Sikh Kanya Maha Vidyalaya at Ferozepore and Jullunder have each over 200 boarders, and several other urban neighbourhoods have successful girls' schools.

¹ *Progress of Education in Punjab*, 1928-9, p. 100.

Punjab Women's Colleges.

Though the total enrolment in women's colleges is still small (104 in 1927), about equally divided between the Government and the Mission Colleges, Lahore possesses three Arts Colleges, the Queen Mary already mentioned, the Lahore College for Women, and the Kinnaird College, a development of the long-established Kinnaird High School; so that gradually the acute shortage of women teachers should lessen. In 1927, 13 out of 20 candidates took an Arts degree and 3 out of 3 passed the L.M.S. degree in Medicine, and 4 out of 4 took a Teaching degree.

The above are the four most important provinces from the point of view of women's education.

UNITED PROVINCES

The United Provinces draw a very tiny percentage of their girls into school. Though the teeming populations of the Ganges valley have lately started four new universities for men, at Aligarh (1920), Benares (1917), Lucknow (1920), Agra (1926), they are still doing nothing to advance simultaneously the (more important) girls. Only 1 per cent. of the girls go to school and these rarely emerge from the primary stage. There are, it is true, four high schools for girls, but all of these are mission schools, and it is chiefly Anglo-Indians who avail themselves of them.

The Isabella Thoburn College and School.

The Isabella Thoburn College and School, Lucknow, U.P., was for long almost exclusively used by Anglo-Indian girls. It is American and Western in outlook, and has been treated with great generosity by its American

supporters. The pupils pay about one-tenth of what the splendidly staffed and equipped schools spend on each girl, apart from capital endowments. But it is rare in India that wealthy parents pay the bare maintenance cost of their children's education. There is in India an ineradicable, and from some points of view, beautiful tradition that the lover of learning *gives* himself to his pupils. Hence India's untiring request that English women should come to teach in India for less than a subsistence salary. One very wealthy parent who demurred at being asked £1 a month for his daughter's books and fees, offered £10,000 as an endowment for the school.

Lucknow is also fortunate in possessing the *Martiniere School*, and is training teachers, but the difficulties of training and placing women in the villages seem still almost insurmountable.

THE CENTRAL PROVINCES, BIHAR, ASSAM

The Central Provinces, Bihar, Assam, are still all very much at the beginning of things. In the Central Provinces there is no college or intermediate institution of any kind for women; 7 high schools, mostly mission, with an average enrolment of 26 girls and only 4 middle schools of which 3 are mission schools. In 1926-7 one woman graduated in Arts and eight took the Intermediate Arts degree from men's colleges. The Central Provinces have a long way to go.¹

¹ Cf. *Progress of Education in India, Quin. Report*, 1922-7, vol. ii, p. 215.

PART III

PROPOSALS FOR ADVANCE
AND AMELIORATION

Besides the ordinary recognized channels for education (the primary, middle, and high schools and the colleges) there are certain other methods of enlightening women. Some of these are half-social, half-medical, such as the training given to mothers in Infant Welfare Centres. The educational facilities available for training in medicine, midwifery, nursing, and sanitation belong to the Health chapter of this book. Experiments in village uplift, training for social service, technical training and the village institute movement will be described here.

Village Uplift.

Of late years it has been realized that the real problem of education in India is a village problem, and, at the same time, that it will never be possible to provide adequate schools for 500,000 small and scattered villages, as long as girls and boys, caste and outcaste, require separate schools.

One of the proposals made, and tried, for overcoming this difficulty is to turn the schoolmaster into a public servant with duties of various kinds. It is proposed, and has been proved possible, that when the villagers really know what they want, and are willing to share the burden, a public servant can be found, call him the schoolmaster, if you like, who will co-ordinate many activities, and make the school the centre of village life.

For the last twenty years the minds of many educa-

tional and social reformers have been moving towards the idea of community education. The leading idea of the scheme is that the school should be a community centre and the leader a community leader.

'In the Bombay Presidency a village medical aid scheme has been devised under which rural schoolmasters are trained to deal with minor ailments and to administer first aid.'¹ It would not be difficult to give the schoolmasters a rudimentary knowledge of medicine, and they might then form a valuable link between the Medical Departments of the Government and the villages. This method of making elementary schools centres of medical work was tried very successfully in a few of the schools of Madras.

'The Sanitary Department could also use them to give very simple instruction on sanitation; the Agricultural Department could use them not only for the distribution of seed, but also for giving the particular instruction which the Department wants to give in each separate area; the Registrar of Co-operative Societies could use them for starting and supervising his societies. At present so far as a majority of villages go all these Departments are up in the air. They have no organization for reaching the mass of the people, and it would be far too expensive for each Department to create its own machinery for its own special work.'²

Wherever a campaign for co-ordinating village activities has been made with sense and sympathy, there has been a very favourable reaction towards girls' schools. This uplift of the whole village certainly looks like the soundest way of attacking the problem.

¹ *Abridged Report, Royal Commission on Agriculture*, 1928, p. 57.

² *Indian Problems*, Bishop Whitehead, 1924, p. 165.

Women's Institutes.

Another remarkable sign of the times is the swift growth of the Women's Institutes movement in Bengal. It is still very young, but the response of that most elusive and inaccessible of persons, the village purdah lady, has been striking in Bengal.¹

There is, in fact, evidence from many sides that the women of India, even the village women, will react to well-directed stimulus towards enlightenment. They are no longer indifferent.

Training for Social Service.

It is inevitable that, in the present state of education in India, there should be a great dearth of women to undertake social services, such as Welfare Work in factories, Care Committees, Health Visiting, Probation Officer or Almoner's Work. Even for the well-recognized professions, teaching, medicine, and nursing, the supply of orthodox Hindu or Mohammedan women is extremely small. There are hardly any well-educated women ready to enter the less well-defined paths of social service.

Consequently training-places, other than the hospitals and medical colleges for nurses and doctors and the normal school for teachers, are in their infancy. And it is still discussed whether volunteers for such work may not best be trained in some country like England, where facilities are in existence. But the expense of training in England makes it prohibitive for all but the very few.

A certain number of Widows' Homes, scattered up and down India, give a training for social service, and it

¹ *Annual Report of S. N. Dutt Memorial Association.*

would seem that among the 26,000,000 of Indian widows there should be an inexhaustible supply of 'Sisters of the Poor'. But it must be remembered that there are as yet hardly any paid posts in social service, and to do difficult voluntary work the social servant needs either private means, prestige, or great independence of character. Widows rarely possess the first two of these qualifications. In fact, in backward communities contact with them is shunned as inauspicious for married women. That prejudice seems to be breaking down. Christian missions freely employ widows, and Indians of reforming sympathies do so also, so that there is beginning to be a demand for training.

Bombay has a very small training school supported by four Christian missions, and grants a diploma in conjunction with the Servants of India Society. This is the only diploma so far available in India.

Much the biggest effort is that of the Seva Sadan, Poona, where 1,000 women are under training (described on page 32).

CONCLUSION

It would appear then that women's education has a long way to go in order to catch up on men's education, and judged merely by statistics the situation looks a little depressing.

But there is a brighter side, and almost everywhere there are encouraging signs. There is, first, the general awakening among women, expressing itself not only in a demand for education, but also in schemes for social reform. The very important Sarda Act, raising the marriage age of girls to fourteen, will vitally affect education, making everything done for girls much more

worth while now that actual marriage, or the possibility of marriage, before fourteen, does not stultify plans for their education.

There are also the numerous sound educational institutions now found in almost every province. The pioneer work of Christian missions and of Government is now being increasingly reinforced by Indian movements such as the Women's University, Poona, the Seva Sadan, Lady Bose's Schools, and the Women's Institutes in Bengal. Much educative propaganda work is being done by the All-India Women's Conference, which is infusing a new spirit among women.

Want of adequate funds is the outstanding problem of women's education to-day. Only when the fact has been grasped that the education of girls is a *sine qua non* of national advance, will sufficient funds be forthcoming to redress the balance between boys and girls. A stronger Women's Inspectorate, better training and better conditions of service for teachers, school premises at least up to the standard required for boys, all these are essential conditions for advance, and all entail a more generous expenditure on girls.

So great is the lee-way to be made up that the watchword cannot be too often reiterated: 'In the interest of the advance of Indian education as a whole priority should now be given to the claims of girls.'

II

HEALTH AND SANITATION

By K. A. PLATT, M.D.

Health Conditions and Statistics.

PREVENTABLE disease in India causes yearly the deaths of between 5 and 6 millions, or nearly the population of Sweden. In addition to this toll of life 'the percentage loss of efficiency of the average person in India from preventable malnutrition and disease is not less than twenty per cent.' and the percentage of infants reaching a wage-earning age not more than fifty.¹

It is stated in the Annual Report of the Public Health Commissioner for 1927² (the latest available at this date) that the birth-rate for that year was 35.27 per mille, the death-rate 24.89 and the infantile death-rate 167 per mille. Comparisons with the rates for the United Kingdom show that the birth-rate for India during the year was approximately twice, the death-rate twice, and the infantile mortality rate twice and two-fifths that of England and Wales.

There is no system of general registration of sickness in India. The figures given in the Annual Report of the Public Health Commissioner with the Government of India are accordingly based on the information supplied in the provincial birth and death returns, which show great variations.³

¹ Resolution passed at All-India Conference of Medical Research Workers, 1926, quoted in *Moral and Material Progress of India*, 1927-8, p. 99.

² p. 2.

³ Cf. *League of Nations Report. Health Organization in British India*, 1928, p. 42, where an improved scheme of general reporting is advocated.

India, it is pointed out, is one of the 'world's reservoirs of infection' for plague, cholera, small-pox, malaria, dysentery, &c., while it is the main reservoir for plague and cholera.

These diseases are always present to a greater or lesser extent in some parts of the country, but it is malaria which takes the greatest toll of life and health. Over three-and-a-half million or more than one-half of the total number of deaths which occurred during the year are attributed to 'fevers', and malaria perhaps accounts for one-third of these. In Bengal alone the deaths from malaria in 1925 numbered about half a million.

The loss of life from disease is, moreover, but one of its results. There is an enormous economic wastage from the debilitating and incapacitating after-effects of malaria, and from hook-worm, kala-azar, and various diet-deficiency diseases which are endemic in India.

The vast bulk of the inhabitants of India are to be found in small villages consisting of a group of mud or baked clay houses distant perhaps several days' journey from the nearest doctor. The village is for the most part approached only by a footpath, for metalled roads are few and far between, and railways are only to a very limited extent available.

Sanitation in any accepted sense of the word is practically non-existent. 'Unprotected wells and tanks (reservoirs), unswept village streets; close pent windows excluding all ventilation: in such conditions does the average villager live and yet observes a remarkably high standard of personal cleanliness and tidiness.'¹

¹ *Abridged Report of the Royal Commission on Agriculture*, 1928, p. 56.

It is not surprising that epidemic diseases sweep like wildfire through the rural areas. Whole districts may be wellnigh depopulated, for death works havoc in the densely crowded huts, and without outside help there is little hope for the villager when the district is invaded by an epidemic such as plague, cholera, or even influenza.

The Ayurvedic and Unani systems of medicine, in use among the orthodox of the Hindu and Mohammedan communities respectively, consist of incantations, amulets, and strange substances combined with the traditional use of herbs and drugs, the action of which, though sometimes remarkably effective, is often doubtful, and occasionally dangerous. The ordinary Indian hakim or medical practitioner knows nothing of the principles of asepsis and he seldom or never attempts major surgery. He still treats his patients according to methods which we regard as medieval. There are, however, indications that an attempt is being made by the National party to bring the indigenous systems up to date, and some of the more progressive Indian hakims are beginning to adopt certain of the principles and methods of western medical science.

Health Conditions of Women.

The Indian woman is exposed to the same risks of disease as the Indian man, but she has the additional handicap of the perils of child-birth.¹ Owing to customs in connexion with caste and purdah, moreover, she may not receive help from a male doctor in her time of peril,

¹ There is an excess of males over females amounting to 9 millions. 'The gap is at its widest in the age-groups 10-20, and may be not unconnected with social customs and practices such as purdah and early marriage and unskilful midwifery.' (*Report of Indian Statutory Commission*, 1930, vol. i, p. 50.)

even if help were available, and will 'die undelivered rather than show herself to a man'.¹ Practical midwifery does not form part of the professional equipment of the hakim, but even if he were a skilled accoucheur he would not be admitted to her presence during labour. The orthodox Hindu woman is accordingly dependent for help in her confinement on the services of the indigenous midwife or dai.

The dai, about whom so much has been written and said, is a woman of low caste and her knowledge of midwifery is derived from tradition handed down from mother to daughter. Although her intentions may be of the best her knowledge is of the worst. The typical dai is unbelievably dirty from a surgical point of view. She has no knowledge of the use of antiseptics and her methods of helping labour are crude in the extreme; they are often brutal and sometimes revolting. It has been pointed out that the disastrous results of such mis-handling are due to the lack of 'the most elementary knowledge of cleanliness and of the course of nature'² on the part of the dai, and that in order to sever the cord a frequent 'practice in Indian villages is for these women to use any sharp implement which is handy, such as a piece of glass, a penknife, a stone, a piece of rusty iron, or even the same sickle which the woman was using in the field when she was called to the case; and hence it is really not surprising to find that the birth is often followed by blood-poisoning and death, either to the child or the mother, or to both'.²

¹ *The Work of Medical Women in India*, Margaret Balfour and Ruth Young, 1929, p. 3.

² Pp. 1-2, *Better Dais*, H. G. Franks, Hon. Publicist of the Lady Wilson Village Maternity Association, 1928. Government Central Press, Bombay.

The perils of child-birth are, in the case of those who observe strict purdah, still further increased by the fact that social custom does not permit of their obtaining the sunshine, fresh air, and outdoor exercise which are so essential to the maintenance of health during pregnancy. The purdah woman tends to become anaemic and to lose the powers of resistance to disease,¹ with the result that, when exposed to infection, as only too often happens during child-birth, she succumbs without a struggle.

In certain parts of India a disease called osteomalacia² is rife amongst classes who observe purdah. This disease, which bears a resemblance to rickets, attacks young and pregnant women. It has the effect of rendering the bones soft and pliant, so that they bend very easily. The sufferer consequently becomes crippled, and, as the bones of the pelvis are especially affected, difficulty in labour is almost always experienced. Indeed in many cases the mother cannot be delivered of a living child without a serious surgical operation.

Early marriage and subsequent pregnancy in immature girls is another cause of difficult and dangerous labour. It accounts for a considerable part of the mortality of mothers and children in child-birth.³

The Hindu mother is regarded as unclean at the time of labour and until she has undergone the ceremony of purification, which is obligatory; thus anything which comes in contact with her during her lying-in is contaminated. Any person who touches her must undergo ceremonial purification before he or she is regarded as clean.

¹ *Tuberculosis in India*, A. Lankester, 1920, p. 140.

² Cf. *The Purdah System and its Effect on Motherhood*, K. Vaughan, 1928

³ Cf. chapter iv.

The prospective mother is accordingly banished to what probably is the most unsuitable room in the house for a process which should take place under the most favourable of conditions. Deprived of light and fresh air, in a room which may be far from clean, and attended by an unskilled dai during a period of enhanced susceptibility to infection, is it any wonder that the mother is so often a victim to her environment?

In view of the deplorable conditions under which labour so often occurs it is not surprising that out of 8 millions of cases of child-birth in 1925 there was a loss of 196,181 mothers; that is to say, out of every thousand labours at the very least 14 mothers died. In some districts the mortality was much higher. In Dr. Adiscshan's field study in 1927-8 of 7,000 confinements in Madras Presidency the death-rate was 17·89 per 1,000 births.¹

The loss by death of mother and child is, however, by no means the only untoward result of the lack of efficient help at child-birth. An incalculable number of women only survive the ordeal to live a life of chronic invalidism. Many become permanently disabled through injuries received in the rough treatment to which they are subjected, and many are, as an aftermath of infection, rendered incapable of having another child, a terrible calamity for an Indian woman whose paramount desire is to become the mother of sons.

Administration of Health and Sanitation.

The difficulties of the task of sanitary administration are considerably enhanced by the fact that social customs in India, including the routine of daily life, bathing, cooking, the taking of food, &c., are based on

¹ *Report of the Age of Consent Committee, 1928-9, p. 163.*

religious ordinances sanctioned by long observance, and any interference with them is not unnaturally resented. Attempts at reform, therefore, at first almost invariably meet with organized opposition, and the work of the reformer is beset with difficulties.

The State, having accepted its responsibility for the physical welfare of the people of India, initiated schemes for the supply of pure water, irrigation, drainage, and the disposal of sewage. Hospitals and dispensaries were established in the chief centres of population, and medical schools and colleges were founded for the training of Indians as physicians and surgeons. Sanitary arrangements and a supply of pure water were provided for the vast gatherings in connexion with the periodical fairs and feasts which are so important a feature in the religious and social life of the Indian. Facilities for vaccination were furnished in all parts of the country, and, in times of famine, relief works were started in the devastated districts and food was distributed to the starving inhabitants. Anti-malarial measures, including the distribution of quinine, gratis or at a small charge, and measures for preventing the spread of epidemic disease were undertaken. In the prevention of famine and as regards sanitation in connexion with fairs the results of administrative action are remarkable.

Finance.

Since Public Health has become a transferred subject its development is largely dependent on small governing bodies and their state of finance. This is often in a precarious condition. 'Both Municipal and District Boards were handicapped by the financial stringency of the early days of the Reforms—they were called upon

with the withdrawal of official control to meet extra expenditure which used formerly to be rendered gratis by Government servants.¹

Provision of Institutions.

At the end of 1927 there were 4,422² state-public, local-fund, and private-aided general hospitals and dispensaries in existence in British India, or roughly one per 56,000 of the population. A comparison with the facilities available to the inhabitants of Great Britain will make it clear that an enormous increase in the number of hospitals and dispensaries is desirable.

There is naturally a considerable variation in the size and efficiency of the Indian institutions. In the chief cities the hospitals are huge establishments run on the most approved lines, with a staff of skilled physicians and surgeons, trained nurses, and an adequate and up-to-date equipment. The town-dwelling Indian of all classes can, if he is willing, have the best of medical advice and treatment.

Most of the hospitals, however, are situated in towns having under ten thousand inhabitants. Some of them are well equipped and do excellent work. In many cases, though the original building may have been of impressive appearance, the hospital is only too often unsuitable in design, badly equipped, and inadequately staffed.³ Lack of funds for upkeep combined with indifference and apathy on the part of those responsible are accountable for this state of affairs.

¹ *Moral and Material Progress of India*, 1927-8, p. 362.

² *Annual Report, Public Health Commissioner*, 1927, p. 196.

³ 'Nothing impressed us more in the course of our journeys through India than the need, in all but the best hospitals, for the raising of the standards of medical treatment, and especially in such matters as equipment and nursing.' (*Report of Indian Statutory Commission*, 1930, p. 279.)

The dispensaries are chiefly to be found in the small towns or larger villages. When well supported and properly conducted they are a priceless boon to the country. They can, however, for the most part undertake only routine treatment. A patient requiring the aid of a skilled surgeon must be taken to the nearest large general hospital for treatment. Failing this, the dispenser will do the best he can for him or the patient will consult the indigenous practitioner.

Attached to the large hospitals in the chief towns are medical colleges and schools which annually turn out a number of well-qualified doctors, the majority of whom engage in private practice. The city-dweller has now a large choice of medical attendants, for there are numerous Hindu, Mohammedan, Parsee, Anglo-Indian, and Jewish doctors practising medicine in the large centres. It is the smaller villages and rural areas which are in dire need of medical help.

To meet the need of the villager, schemes are being evolved in some provinces for the subsidization of private practitioners in order to induce them to settle in rural areas.¹

Medical Provision for Women.

Government and Municipal Hospitals have always admitted women as patients, but until women members of staff were forthcoming Indian women rarely availed themselves of the opportunity for treatment. Some of these hospitals which 'cannot employ an assistant woman doctor retain a midwife . . . who has had one year's training in nursing and midwifery, and who acts

¹ *Moral and Material Progress of India*, 1927-8, p. 362.

as a sort of attendant on the women in the female wards.’¹

An interesting account of the remarkable work of early pioneers is given in *The Work of Medical Women in India*, by Dr. Margaret Balfour and Dr. Ruth Young. Such women often had to deal with a task of incredible difficulty, almost single-handed. ‘There were no Indian nurses. . . . The doctor had frequently to do the nursing, and on occasion she was her own anaesthetist and her own compounder. There was no hospital. She had to make the best of some Indian house.’² The book also shows the great debt which medical aid to women in India owes to missions.

The first hospital for women was opened in 1869 by the American Methodist Episcopal Mission in Bareilly. Others were established shortly after, including the first Government Hospital for Women in Bombay in 1886. National schemes to relieve the sufferings of Indian women followed. In 1885 the Countess of Dufferin’s Fund, or the National Association for Supplying Female Medical Aid to the Women of India, was founded. In 1903 was established the Victoria Memorial Scholarships’ Fund to train indigenous midwives, and in 1918 the Lady Chelmsford League for Maternity and Child Welfare, with the object of training health visitors and furthering preventive and educational measures.

With the money provided for the Dufferin Fund, hospitals for women were established in centres all over India. It was realized that these hospitals should be

¹ *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, pp. 182–3.

² *Ibid.*, p. 16.

staffed by Indians, but at that time there were very few facilities for the training of Indian women either as doctors or nurses. Women doctors from the United Kingdom, therefore, were put in charge of the hospitals and the training of Indian girls as doctors, nurses, and midwives was encouraged, scholarships being awarded for the purpose.

The work of the Dufferin Fund 'may be briefly epitomized as medical relief to women by women, medical tuition of women, and the doing of all things conducive to these objects'.¹ It functioned through a co-ordinating Central Committee and through Provincial Branches responsible for their own funds. Representations made in 1909 by the Association of Medical Women in India to the Central Committee resulted later in several improvements in conditions of service, including professional control of hospitals, the appointment of a woman member to the Central Committee, and the formation of the Women's Medical Service in 1914, for the administration of which a Government subsidy of about £10,000 was paid yearly to the Countess of Dufferin's Fund.² Much disappointment was, however, felt that the new service was not given Government status. It started in 1914 with a cadre of 25 members. In 1917 the subsidy was increased and the cadre raised, and in 1925 a 'training reserve' of 8 was added. At the end of 1928 there were 38 medical officers, 3 temporary members, and a training reserve of 7. Of the officers 11 were engaged in educational and 3 in administrative work.

¹ *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 36.

² *Ibid.*, p. 50.

Provision of Institutions for Women.

There are now in existence 96 hospitals and 43 dispensaries staffed by women medical missionaries, 26 hospitals in charge of members of the Women's Medical Service, and women's wards in most of the civil hospitals or dispensaries. Maternity work is an important side of the work of the women's hospitals. The female wards in the civil hospitals are for the most part in the care of women (usually of the sub-assistant surgeon grade) working under the civil or assistant-surgeon. 'The woman assistant or sub-assistant surgeon has often no other woman but a midwife (perhaps a poorly trained one) to assist her or to anaesthetize the patient. Hence the relief of the women may be very inefficient. Moreover the position of a young Indian or Anglo-Indian woman alone among a male staff is often very difficult. Yet the Local Governments have not, with one exception, availed themselves of fully trained and experienced medical women who may be available for the inspection of these female wards and the organizing of better means of relief for the women.' ¹

Hospitals under the Dufferin Fund and those officered by members of the Women's Medical Service are inspected by the Chief Medical Officer of the Service.

The upkeep of the hospitals is a serious problem. The funds for their maintenance are derived from different sources. The mission hospitals are almost entirely supported by voluntary contributions. In some cases Governments have recognized the value of the work by allotting grants-in-aid, but these are relatively small in

¹ Memorandum on the need for the extension of Medical Aid by Women in India presented by the Association of Medical Women in India to H.E. the Lady Irwin.

amount. Everywhere the work is hampered and its extension is limited by lack of money. The hospitals under officers of the Women's Medical Service are owned by provincial branches of the Countess of Dufferin's Fund, provincial governments, municipalities, or by private owners. They are maintained by grants-in-aid from provincial governments, municipalities, and the Dufferin Fund, and by private donations and subscriptions. Unfortunately there are few and inadequate endowments for maintenance. The Lady Hardinge College and Hospital is supported by the Government of India, with grants from provincial governments. The women's hospitals in the Indian States are for the most part maintained by the State; in a few instances, however, they are kept up by municipalities or private individuals.

The yearly reports show a steady rise in the demand for an increased amount of accommodation in the women's hospitals, and the fact that 'overcrowding is increasing annually'.¹

As a result of financial stringency some of the hospitals are in a sad state of repair; some are badly equipped, lacking the most indispensable instruments and appliances; most are inadequately staffed; and there is a universal cry for more monetary help. The Annual Reports of the Dufferin Fund reiterate year after year the need for help which becomes increasingly pressing.

Medical Education for Women.

The provision of facilities for training Indian women to become doctors was a serious problem. The pioneers in this work were the missionaries. In early days one or

¹ *Annual Report, Dufferin Fund*, 1928, p. 11.

two medical schools were established by them, notably one in Ludhiana,¹ in order to train Indian women as sub-assistant surgeons, a medical qualification of a lower standard than is considered desirable nowadays. These medical women were for the most part absorbed into the missions and many of them did excellent work. In some of the provinces women were trained in the Government Medical Schools up to the same standard, but the work and the environment were not attractive to Indian women of the better classes.

A few women, chiefly Parsees, who do not observe purdah, attended the complete courses of the medical colleges of the Universities of Bengal, Bombay, Madras, and other provinces, and took the medical degree of M.B., B.S. Some girls were enterprising and brave enough to leave their homes and country in order to obtain a European or American medical degree.

In order to supply the need for an institution in which a high-grade medical education could be obtained under conditions which would, as far as possible, enable the students to observe the religious and social customs of the communities to which they belong, Lady Hardinge founded the Medical College which bears her name. The college and attached hospital were opened in 1916. They are situated in a spacious compound with separate hostels for students of the different communities. There is accommodation for 120 resident students of all races and all religions from all parts of India. The college is affiliated to the Punjab University for the M.B., B.S. degree and is now turning out graduates each year.

Since then other Government Medical Schools for Women have been established at Agra and Madras, so

¹ In the Punjab.

that with the mission schools at Ludhiana and Vellore there is now a total of one college and four schools staffed by women. The number of students now undergoing a full medical training is about 650.¹

Private Practitioners.

Nowadays in all the chief cities and large centres there are numerous women medical practitioners, Parsee, Anglo-Indian, Hindu, Indian Christians, and others, who undertake the treatment of women and children. Many of these are well qualified and most competent, possessing the confidence of their patients. Only a few of the practising Indian medical women are of high caste, owing to the existing prejudices in connexion with caste and purdah. The majority of those in private practice are, accordingly, either Christians or non-Brahmin Hindus, but in spite of this they are in many cases well received by the orthodox.

Owing to there being no universal system of medical registration, any woman who chooses may style herself a 'lady doctor', whether she is entitled to do so or not. Some such have received only the training of a compounder or nurse. Others possess inferior medical qualifications and may fail to put in practice the principles inculcated during what we now regard as an inadequate training for responsible work.

It is, moreover, for the most part only in the well-populated centres that medical women of any grade are to be found. It is difficult for a young unmarried woman to live alone and practise her profession. A sparse and scattered population, difficulty of transit, and the extreme poverty of the villagers further increase the

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 163.

difficulties of practice in the country districts, so that there is, accordingly, a complete lack of opportunity for an Indian woman who lives far away from a city to receive medical help in her own home.¹

*The Nursing Profession.*²

‘It was the Mission Hospitals who first started the training of Indian nurses. When Mission Hospitals for women were first opened in India, English nurses came out to help their medical sisters, but not in sufficient numbers to do all the nursing of a hospital. They sought therefore to train Indian girls as nurses. . . . For a very long time practically all the Indian nurses who underwent training were Christians, as the profession was not looked on with favour by others. Even when non-Christian girls began to take up professions, such as medicine or teaching, they did not take up nursing, against which there was a prejudice. This is being only slowly overcome and even now the number of Hindu or Mohamadan girls in the nursing profession is very small. . . .

‘Like their co-workers in England, nurses in India have for many years had before them, as their goal, the registration of nurses. Since this was only achieved in England a few years ago, it is not to be wondered at that registration of nurses has not yet materialized. Beginnings have, however, been made, and to Madras belongs the credit of introducing legislation on this subject. A bill was introduced into the Madras Council in 1926 to secure registration of nurses in that Presidency, and

¹ In *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 62, Dr. Hilda Lazarus advocates the service of medical women in rural dispensaries.

² *League of Nations Report. Health Organization in British India*, 1928, pp. 62-4.

control their examinations and work. . . . In the Punjab, in connexion with the Punjab Central Midwives' Board, a register is kept of all midwives, nurse dais, and dais, and though the Board has no legal powers over those on its register a useful purpose is served by its existence.

'In Bengal the State Medical Faculty maintains a roll of qualified nurses and midwives, and in Bombay the Presidency Nursing Association does the same. In the United Provinces the State Board of Medical Examinations conducts examinations and issues diplomas whereby a register of their own diploma-holders is obtained.

'The setting up of proper standards of training and the holding of examinations by authoritative bodies is a necessary step in the attempt to secure registration. This has been done in most provinces. In Madras under the new Act a body will be constituted, called the Madras Nurses and Midwives' Council, which will conduct examinations and issue diplomas. The Bengal Medical Faculty holds the final examinations for nurses in two grades, Senior and Junior, and also the midwives' examinations. In Bombay Presidency the Nursing Association holds examinations for nurses and midwives whose certificates are signed by the Surgeon-General. In the United Provinces the examinations are conducted by the State Board. In all these cases certain hospitals are listed as "recognized" training institutions for the purpose.

'In the Punjab there is no "official" Board of Examinations. Its place is, however, largely taken by the "North of India Board of Examiners for Mission Nurses". This Board was formed to control nursing education in Mission Hospitals in North India. Some hospitals have been affiliated to it for the purpose of

examination only, such as the Lady Hardinge Medical College, Delhi, The Lady Reading Hospital, Simla, and the Lady Aitchison Hospital, Lahore. . . . There is a similar Board for Mission Nurses in South India. These Boards have done a great deal to raise the standard of nursing in their respective areas.'

The Trained Nurses Association of India is affiliated with the International Council of Nurses and registered under the Act of 1860. Affiliated to it is the Health Visitors' League and the Midwives' Union. It holds conferences annually, and issues a monthly journal and a handbook containing much useful information about the profession in India.¹

The Midwife.

The earliest efforts to tackle the appalling problem of training the 'dai' were made by male assistant-surgeons, but 'their praiseworthy efforts' were 'no doubt looked upon by the pupils as both shocking and presumptuous',² and the classes were soon abandoned without result.

The training of midwives in India may be roughly divided under two headings :

- (1) The training of fully qualified midwives.
- (2) Elementary instruction to indigenous dais.

The first of these methods, 'the training of midwives, other than indigenous dais, is carried on at a great many hospitals, both mission and other. These midwives work almost entirely in the towns: a good portion seek paid posts; others engage in private practice. As a rule

¹ *League of Nations Report. Health Organization in British India*, 1928, p. 64.

² *Work of Medical Women in India*, 1929, M. Balfour and R. Young, 1929, p. 13.

they charge much higher fees than even the trained indigenous dais. Those in paid posts are often in the employment of local authorities such as municipalities, and their services are available to the poor. The supplying of trained dais or midwives to the villages is an exceedingly difficult problem . . . the solution of which has scarcely been attempted.'¹ A notable example of the first method has been made in Madras Presidency, where the aim is to replace the indigenous dai by fully trained midwives. Dr. A. Scott, Chief Medical Officer of the Women's Medical Service, writes:² 'The attempt has met with a certain amount of success, anyhow in the larger towns. This is due to the fact that education is more advanced in that province and hence larger numbers of girls come forward for training, and also because the standard of living is lower and cheaper there than in other parts of India so that trained workers accept lower salaries than elsewhere.'

Two outstanding pioneers who attempted the second method, that of training the dais, were Miss Hewlett of Amritsar and Dr. Henderson of Nagpur.

In 1903 the Victoria Memorial Scholarship Fund was founded by Lady Curzon. The express object of the Fund was to train indigenous midwives, as opposed to midwives of other classes or castes who were already being trained in Dufferin and mission hospitals. The amount of money collected by public appeal for this object was nearly seven lakhs, and the income of the Fund is about Rs. 34,000 (£2,550).³ In each province

¹ *Annual Report, Public Health Commissioner*, 1927, pp. 75, 76.

² Answer to questionnaire sent by Women of India Survey.

³ *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 130.

organizations were formed having local committees connected with the centres.

In Bombay the same policy has been carried out by the Lady Wilson Village Maternity Association, which was formed in 1926 largely as a result of a scheme worked out by Dr. A. de Gama, Assistant-Director of Public Health. This provides short intensive courses in 'the rudiments of cleanliness and sanitation and non-interference', to be given together with 'a simple outfit of midwifery essentials'.¹ The dais are brought into large centres for about a fortnight and witness about a dozen confinement cases in an up-to-date hospital. The scheme of training is necessarily extremely elementary and has been criticized on the score of its inadequacy unless followed by careful supervision. A system of reward for the best results during the next year is given after the dais return to the village. Little more can be done than to divest the dai of her most ghastly and insanitary practices, but this at least is something. The most hopeful cases are selected for tuition. 'We cannot hope to render this service of simple training to every dai, for the utmost we can do for some time to come is to take two or three of the more progressive and intelligent dais from each large village, train them in the principles of hygiene and health, and then encourage them to act as missionaries of health in their own villages by telling the other dais what they saw and learned under the scheme. But we must aim at reaching every large village with the scheme.'²

It is claimed by the Association that 'the first few months' work gave undeniably encouraging results:

¹ *Better Dais*, 1928, H. G. Franks. Lady Wilson Village Maternity Association, 1928, p. 3.

² *Ibid.*, p. 17.

Five hundred complete dais' outfits were prepared and purchased, and about three hundred distributed to taluka sub-committees for placing in selected villages. Within the first year (up to 31 March 1927) 113 dais from 64 villages were brought into Poona, and 108 of these went the full course, only five returning half trained owing to domestic difficulties.' ¹

As regards Northern India, Dr. A. Scott writes: ²

'The general opinion is that, since trained workers will not be available for many years, we must try to instruct the indigenous midwives. This cannot be done in hospitals as these women are already practising their profession and will not leave it for a year or more to go for training. The training has therefore to be brought to them. This is possible in centres where there are women's hospitals or health visitors at work, but it does not touch the villages. In addition it must be borne in mind that the training of illiterate women of this class is no easy matter and it has really only been successful when undertaken by women of real enthusiasm, teaching ability, and imagination. Such are hard to come by.

'Even supposing that workers in sufficient numbers could be trained, we have still to overcome the difficulty of getting them appreciated and employed by the general public. There is general reluctance to pay for the more skilled worker since the benefit of so doing is not appreciated, and it is quite common to meet with men in the position of municipal commissioners who employ untrained midwives for their wives.

'The two processes of training the workers and educating the public have to go on *pari passu*, and in the past progress has been so exceedingly slow that we cannot

¹ *Better Dais*, p. 6.

² Answer to questionnaire.

hope to see the compulsory training and registration of individuals accomplished throughout India for a great number of years.'

Dr. K. M. Bose, who has had many years' experience of training the dais states:¹

'Unless the indigenous dai is trained I see no other way of supplying the vast needs of the country, containing as it does over 700,000 villages.'²

'It is impossible to believe that at any reasonable period of time these villages will be supplied with even a qualified woman for, say, a group of 3 villages, so we must do our utmost to mould the raw material into at least a worker who will do no harm, and will diagnose conditions in time to get for the poor sufferer some better assistance. This has been in my experience one of the most helpful features of our dai work.'

At the Women's Christian Medical College, Ludhiana, 'indigenous dais are sent in from the surrounding villages for training, and when they go back monthly visits are paid to those villages in order that their work may be watched. The health visitor goes out if possible by motor in the morning, and visits the cases attended during the past month, and those whom the dai is expecting to attend in the coming month. In the evening a Lantern Health Lecture is given for which the women of the village are collected.'³

As regards financial measures to stimulate the supply of workers, Dr. A. Scott writes:⁴

'The supply of *suitable* women for training is terribly

¹ *Report of Maternity and Child Welfare Conference, Delhi, 1927, p. 115.*

² The number of villages estimated in the Report of the Statutory Commission is 500,000.

³ Memorandum to the Women of India Survey by Dr. Edith Brown.

⁴ Answer to questionnaire.

meagre. Were greater numbers available the question of cost would certainly arise. It could be met by a variety of agencies such as municipalities, district boards who could give stipends for pupils, hospitals which could give them free training, and provincial funds.'

In the Punjab scholarships are given to the daughters of dais in the hope that if they follow their mothers' calling, they will not be hopelessly illiterate. Unfortunately these scholarships end at the primary stage and the girls are then lost sight of, as they are too young to train as midwives.

Stipends to be provided by local authorities are recommended by Dr. Commissariat, Superintendent of Medical Aid to Women, U.P.¹ Scholarships are advocated by the Parliamentary Sub-Committee of the Bombay Presidency Women's Council, and by an anonymous correspondent who writes:¹ 'Stipends for training should be offered by "local bodies" and women selected who can go back to live in their homes after training. I am of opinion that midwives should be engaged by the same voluntary associations as those controlling health visitors and paid at a fixed rate, receiving a capitation fee on each case above a certain number, or, alternatively, the costs for the midwives' service should be fixed by the Association employing her, and she should pay a proportion of her fees back to the Association.'

As regards registration, the majority of correspondents appear to consider this step premature, except in special localities where there are sufficient numbers training to replace the untrained. Licences issued might 'be graded to show at a glance whether the woman had received

¹ Answer to questionnaire.

any training, and if so what standard of training she had attained'.¹

In the Report of the Public Health Commissioner for 1927 it is stated: 'Registration of midwives is not yet achieved in India; but, in the Madras Presidency, a bill has been passed this year, to secure it.'²

Such legislation should at present be adoptive, as there are very few places where there are sufficient facilities for the training and supervision of all these women at present practising, and it is essential that if legislation is to be made effective there must be trained workers available.

The Parliamentary Sub-Committee of the Bombay Presidency Council of Women suggest³ a scheme of travelling midwives to 'visit each village at specified time intervals with a view to the gradual rise of standard'. This method has been already adopted with success by Miss Piggott in Sind.

Supervision an Essential.

Whatever their differences as to methods of training, on one point experts appear to be agreed, viz. that supervision is the only way to success. As skilled workers are so few in comparison with their gigantic task, the solution of this baffling problem must 'take years to compass in a country the size of India, where there are some eight and a quarter million births annually. Supervision will require as a matter of course a permanent staff after all dais are trained and registered.'⁴

¹ J. A. Richey, C.I.E., former Commissioner of Education with the Government of India, answer to questionnaire.

² *Annual Report, Public Health Commissioner*, 1927, p. 76.

³ Answer to questionnaire.

⁴ *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 139.

Maternity and Child Welfare Work.

In 1918 the Lady Chelmsford All-India League for Maternity and Child Welfare was founded in order to undertake further preventive medical work by means of the training of health visitors and maternity supervisors, and by extended propaganda in connexion with the promotion of maternity and child welfare.¹ The first Health School for training health visitors was organized at Delhi in 1918, 'the first Maternity and Child Welfare Exhibition in India was held at Delhi in 1920, the first All-India Baby Week was organized in 1924, an All-India Conference on Maternity and Child Welfare was held at Delhi in 1927'.² 'In 1923 it was decided to amalgamate the four funds for the physical welfare of Indian women under one administration.'³ There are the Countess of Dufferin's Fund, Women's Medical Service for India, Victoria Memorial Scholarship Fund, and the Lady Chelmsford All-India Maternity League.

Though 'Infant Welfare Work has so far only touched the fringe of the subject and is mainly confined to the small proportion of the population who live in cities',⁴ it is a subject which has captured the interest of Indian women and promises to extend if the provision of trained workers increases in anything like proportion to the need.

In the League of Nations Report on Health Organization in British India it is stated : 'Child Welfare work is carried on locally in a variety of ways. The most

¹ *Indian Year Book*, 1930, p. 604.

² *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 68.

³ *Indian Year Book*, 1930, p. 605.

⁴ *Annual Report, Public Health Commissioner*, 1926, p. 208.

common is that of a voluntary organization or local committee for the purpose, on which body, however, officials are freely represented, and which is usually financed in part by the local authority of the area Municipal Committee District Board. In large towns the child welfare work is occasionally organized and supported entirely by the Municipal Committee, in which case it is directly under the Medical Officer of Health. Only a very few places are employing medical women to organize the scheme; the usual procedure is to employ one or more health visitors or nurses.

‘There are seven schools for the training of health visitors. Of these, three are giving a high standard of training in English (Delhi, Punjab, and Bengal); three are giving a course in the vernacular which is best suited to the needs of the province (Nagpur, Poona, and Lucknow) while the seventh is about to be reorganized and will approximate to the standard of the first group.’

The work of the health visitor is mainly that of supervision of maternity work. She also often trains the dais and conducts the welfare centres. The total numbers of health visitors training at these schools was less than 50 in 1929, and those at work not more than 250 for a number of births which exceed 8 million, while in England and Wales in 1926, 3,963 whole or part-time officers engaged in health visiting dealt with under 700,000 births.¹ Yet because medical women are frequently not available, the health visitor in many cases does ‘what would ordinarily (in England) be done by a doctor, that is, she holds the child or infant consultation.’²

¹ *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 151.

² *Ibid.*

In England and Wales, with a population of 39,482,000,¹ the number of maternity and child welfare centres amounted in 1928-9 to 2,522.² The number of maternity centres in three Indian provinces in 1927 (the latest date for which figures are available), was as follows: 33 in the United Provinces,³ 55 in Madras,⁴ 21 in the Central Provinces,⁴ with respective populations of 45,375,787, 42,318,985, and 13,912,760. Statistics for the other provinces are not obtainable.

The extension of a 'training reserve', such as exists in the Women's Medical Service, to health workers, nurses, and midwives, whereby scholarships enabling such women to obtain further qualifications in England is advocated by Dr. A. Scott.⁵ The need for greater numbers of recruits, both to the medical profession and to the calling of health visitor, cannot be over-emphasized.

As regards the propaganda work of the Lady Chelmsford League, the office acts as a central bureau for information—a travelling exhibition can be sent on request to any part of India; literature of all kinds, posters, films, lantern slides, maternity and infants' outfits are provided. The League is in touch with similar work in other parts of the world and is able to supply expert advice. 'It performs, in short, the work which in another country would be under the Ministry of Health.'⁶ More films such as 'The Cry of the Children'

¹ *Annual Report of the Chief Medical Officer of the Ministry of Health*, p. 11.

² *Ibid.*, p. 40.

³ *Annual Report, Public Health Commissioner*, 1927, p. 84.

⁴ *Ibid.*, p. 86.

⁵ Answer to questionnaire.

⁶ *The Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 148.

are wanted,¹ and the extension of this vivid means of educative propaganda depends upon increased financial support.

Voluntary Associations.

The Report on Health Organization in India issued by the League of Nations gives the names of three associations which pursue their activities in India. These are the Indian Red Cross with its junior branch, the St. John Ambulance Association, and the Leprosy Relief Association. All of these do most excellent work. There are in addition other undertakings dealt with elsewhere, which are exerting a most important influence on the hygienic condition of the nation. Among these are the Seva Sadan, the Servants of India, the work initiated by Saroj Nalini Dutt, and the Gurgaon Uplift Movement.

The effect of their work, whether ameliorative or educative, is cumulative and will undoubtedly have a very far-spreading result.

Dr. Scott, the Chief Medical Officer of the Women's Medical Service, makes a useful suggestion. She writes: 'In some places in India an experiment has been tried of having village schoolmasters trained to give first aid medical help of an elementary nature. It might be possible to use such a system in the case of women teachers by giving them outlines of preventive medicine in their training course. This would appear to be more valuable than turning them into poorly trained midwives or nurses. Much more than half the ills of various kinds from which India suffers are preventable, and it is extremely important to lay this point of view before

¹ Mrs. Cuthbert King, Punjab, answer to questionnaire.

those who are to teach the young. Take for example the concrete instance of midwifery. It will be far better to make teachers grasp the principles of cleanliness and non-interference, than to teach them to do actual deliveries. The great majority of these can be left to the ordinary midwife, even when untrained, provided these important points are grasped.

‘A village schoolmistress who has herself been trained in the principles of common-sense hygiene will be able to impart a large amount of practical knowledge to her pupils who will become the mothers of the next generation. The teaching of elementary hygiene should take a very important place in the education of the child, both boy and girl. It is very certain that sanitation must begin in the home. No nation can make any permanent advance in civic, domestic, or personal hygiene until the women have realized its necessity.’

Conclusions.

Publications on health conditions in different parts of India reveal widespread suffering, debility, and waste of life, a vast proportion of which is preventable.

In other countries the advance of sanitation and preventive medicine has brought a wonderful degree of relief from such ills in a comparatively short space of time. Why cannot such measures be applied with effect in India? In the West diseases similar to those which ravage India used to prevail but have now been largely eliminated. Even in tropical or semi-tropical countries, with climates formerly believed to be almost fatal to white men, a remarkable conquest of unhealthy conditions has been effected.¹

¹ *Economic Development of India*, V. Anstey, 1929, p. 71.

It is clear that where sufficient expenditure, adequate sanitary machinery, and popular support exist, miracles may result.¹

In the first place, finance. The proportion in 1928-9 expended on Public Health (taking both Central and Provincial finance) was only 0.01 of the total expenditure.²

Financial provision for Public Health largely rests with District Boards and other units of local Government which are not yet alive to the need, even when threatened by devastating epidemics.³ A consolidating Public Health Act for all India, by the enforcement of a minimum standard, and by making compulsory much inoperative legislation, might effect the revolution in sanitation which followed the Public Health Act of 1875 in England, by which 'the scourge of water and dirt-borne epidemic disease was practically abolished.'⁴

Secondly, as regards machinery. At present the numbers of health officials are quite inadequate even in the most advanced provinces.⁵ Nor have sufficient training grounds hitherto existed to provide increased personnel. It is hoped that the new All-India Institute of Public Health 'will train and equip the younger generation of Indian practitioners . . . for this great work which is linked up so closely with the future of this country.'⁶

¹ It is only fair to add that in India where Government has had a sufficient measure of control, e.g. in the case of prison administration, the vital statistics bear testimony to the superior health conditions. *Annual Report, Public Health Commissioner*, 1926, p. 196.

² *Moral and Material Progress of India*, 1928-9, p. 222.

³ *Report of Royal Commission on Agriculture*, vol. viii, p. 511.

⁴ *Annual Report, Public Health Commissioner*, 1926, p. 208.

⁵ *Ibid.*, p. 219.

⁶ *Ibid.*, 1927, p. 239.

'Thirdly, popular support of public health measures presupposes some rudiments of education and appreciation of hygiene scarcely attained as yet in India. Several Public Health Departments now undertake instruction in hygiene by means of gruesome posters, health exhibitions, and demonstration trains, &c. With 'corporate action' on the part of the villagers insanitary evil would be easily remediable.¹ Sanitary crusades on the part of co-operative societies and voluntary organizations are setting to work in certain areas. The extension of such efforts a thousandfold and the recruitment of an army of missionary workers are required in order to tackle the gigantic task of prevention. 'Diseases are never stamped out by curing them but only by preventing them.'² 'Release from the stranglehold of disease', we are told, would enormously enhance India's prosperity.³ The Royal Commission on Agriculture advocate in their report the development of the rural health service to the 'utmost extent and with the utmost speed' and recommend its assistance 'without stint of men or money'.⁴ If India can afford the present immeasurable economic wastage due to disease, can she not afford the cost of prevention?

Infantile mortality may be taken as the 'measure of the general level of sanitation'.⁵ Owing to the vast improvement in sanitation, this has been halved in England in the past twenty-five years. Improvements in hygiene and the better provision for maternity and infant welfare are the most crying needs of all in

¹ *Abridged Report of the Royal Commission on Agriculture*, 1928, p. 56.

² *Annual Report, Public Health Commissioner*, 1926, p. 219.

³ *Report of Royal Commission on Agriculture*, 1928, p. 493.

⁴ *Ibid.*

⁵ *Annual Report, Public Health Commissioner*, 1926, p. 215.

India. But the inadequacy of the health service for women is still more glaring than that of the general provision.

It is evident that a Women's Medical Service under the present voluntary system is absurdly inadequate and cannot cope with the needs. Government status and support would result in better co-ordination, higher and more uniform standards of work as well as in growth and extension. Since maternity and child welfare work has become part of the work of the Ministry of Health and is stimulated by Government grants, the maternity work started by voluntary effort in England has made vast strides. According to two medical women who have given years of service to India: 'What is needed is the appointment of a medical woman at the Administrative Head-quarters of each of the larger provinces to organize, inspect, and secure the best possible medical relief for women.'¹

Further, 'it is clearly indicated that the time has come to establish a Bureau of Maternity and Child Welfare at the head-quarters of the Government of India, controlled by a medical woman working in the Department of the Commissioner for Public Health. . . . A Research Department for diseases of pregnancy and infancy is needed, either in connexion with the Central Bureau, or preferably, in connexion with an existing research organization. This is one of the most important fields of tropical research—too important to be left to the occasional services of honorary workers.'²

The following points were put before H. E. the Lady

¹ *Work of Medical Women in India*, M. Balfour and R. Young, 1929, p. 186.

² *Ibid.*

Irwin in a Memorandum presented by the Association of Medical Women in India:

A. *Medical Relief.*

‘Increase of the Women’s Medical Service.

Appointment by Local Governments of medical women to administer women’s medical work.

More generous aid for charitable hospitals for women.

The provision of medical aid by women to rural areas.

B. *Medical Preventive Work.*

The appointment of medical women, in connexion with the office of the Commissioner for Public Health with the Government of India, for the organization of Maternity and Child Welfare Work.

The appointment of medical women to the offices of the Directors of Public Health in the Provinces for a similar purpose. A government system of grants-in-aid to approved schemes of Maternity and Child Welfare.

The appointment of medical women to carry on research into the causes of maternal and infant mortality. Facilities for the training of medical women in preventive medicine, also facilities for the training of health visitors.’

The following is an extract made from a Statement for the Indian Statutory Commission by the National Association for supplying Medical Aid by Women to the Women of India:

‘The female population of British India may be estimated to be about 120 million. As far as can be ascertained there are about 400 women doctors working in India with registrable qualifications. Of these, 42 are in the Women’s Medical Service under the Countess of

Dufferin's Fund, and 15 in the Junior branch of that service and in the training reserve. About 90 are working under provincial Governments in Local Fund hospitals. Possibly 150 are working under Missionary Societies and something over 100 are in private practice. There is therefore roughly one qualified female doctor for every 300,000 of the female population in British India.

'The existence of the purdah system makes the need for women doctors in India far greater than in other countries. It is a matter of common knowledge that the proportion of deaths at childbirth is notoriously high, and the ratio of infant mortality is deplorable. Apart from maternity, gynecological, and ordinary medical cases, there is a pressing need for qualified doctors to specialize in the vast field of research in female complaints and to fill the professional appointments in medical colleges and schools for women.

'Apart from its subsidy of Rs. 3,70,000 for the Women's Medical Service¹ the Government of India does nothing to supply women doctors for the people. This is left to local bodies and charitable institutions who are able to touch merely the fringe of the problem.'

A vague suspicion unfortunately exists that the formation of a Women's Medical Service in some way means British control and a preponderance of British medical women. It is not the task of this book to state what proportion of British women are necessary at the present stage, but there can be no question that by Indian women only can the army of medical workers necessary to the full development of the Service be supplied. It is

¹ And its grant towards the maintenance of the Lady Hardinge Medical College, Delhi.

frequently stated that Indian women are deeply interested in maternity and child welfare. Will they leave this development to haphazard voluntary effort, or will they insist upon the recognition by Government of its duty in this most important of all matters; in order that by the adequate provision of medical and health workers India may not lag behind other civilized countries in the march of progress towards health?

III

WOMEN IN PUBLIC LIFE

(INCLUDING CIVIL AND POLITICAL STATUS)

By A. R. CATON

APART from the political future of India there is scarcely any subject more in the public eye in that country to-day than the advancement of women. India may be described as waiting expectantly for the services of women to bring her new life and well-being. In almost every quarter this attitude is to be seen; hardly an official report of importance is published which does not lay stress on the vital need of the education of women as the initial step to the release of their potentialities as guardians of the coming generation, and as contributors to India's general welfare and progress.

Recognition of the value of women to the community and the principle of civic equality is also to be seen in the statements of members of the Nationalist movement. The crying need for the work of women in social reform and in services which promote welfare, notably those of education and health, is one of the main causes of this sympathetic and encouraging attitude to the emancipation of women.

The following passage occurs in the report of the Indian Statutory Commission:¹ 'The Women's Movement holds the key of progress, and the results it may achieve are incalculably great. It is not too much to say that India cannot reach the position to which it aspires in the world until its women play their due part as educated citizens.'

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 53.

Growth of the Women's Movement in India.

The Women's Movement in India, regarded broadly and comprehensively, may be divided into an early and pre-war period of isolated efforts, initiated by individual pioneers and organizations, towards social reform and the advancement of women's education, and the more consolidated and definitely feminist movement which arose at the end of the war, and has since grown with remarkable vigour and rapidity.

The origins of the earlier movement may be traced to the work of early Indian reformers of both sexes, and to the influence direct and indirect of Christian missions.

The wave of demand for emancipation amongst women, which spread so widely after the war, found a powerful response in India as if from some long pent-up impetus. The first feminist organization to arise in India was the Women's Indian Association, formed in Madras in 1917. It had then similar aims to those of the Poona Seva Sadan, but, 'though started entirely as an educational institution the movement for the Reform Bill proved that a most necessary part of work for the advancement of women was propaganda in support of woman's suffrage.'¹ This was accordingly added to its objects. It has become an All-India Association and has now seventy branches, the greatest number of which are in South India, though flourishing branches exist as far north as Lahore and Lashkar.¹

Work of Women's Societies.

Movements towards adult education for women similar to the Women's Institutes in England are to be

¹ *Indian Year Book*, 1929, p. 473.

found in different parts of India, in particular in Bengal, Madras, and the Punjab.

The Federation of University Women in India, composed of Associations of Women Graduates, exists in order to promote concerted action, interest in public life, and international understanding.¹

There are now five Provincial Women's Councils having as their object the association of women of all races, for service, for the advancement of women, and for the affiliation of women's societies. These organizations undertake special lines of work towards the furtherance of education and social welfare.

The National Council of Women in India was founded in 1925 in order to federate the Provincial Women's Councils and other societies with similar aims for women's advancement and welfare and to link India with international women's movements.

The most important and far-reaching of the many activities of which the women's movement in India is composed is the All-India Women's Conference on Educational Reform. Four All-India Conferences have been held so far, meeting yearly for three or four days, and a large number of local constituent conferences are held in preparation every year.

The original object of the Conference was to promote the education of women, and it included within its scope questions which form the most formidable obstacles to education, e. g. child marriage and purdah. But at the third Conference, held at Patna in 1929, it was resolved that social reform should be undertaken as a second activity, and that the title should be in future

¹ *Handbook of Women's Work, Bombay Presidency Women's Council, 1928-9*, p. 51.

the All-India Women's Educational and Social Conference.

Women of all creeds and castes from far and wide attend this yearly gathering, and a striking feature has been the presence of numbers of women in purdah, many of whom have travelled long distances in order to take part. The proceedings are compiled into a report each year, the report of the Fourth Conference, held in Bombay in January 1930, being issued in English, Hindi, and Urdu.¹

During the year prior to the holding of the Fourth Conference at Bombay in 1930 there were thirty-two constituencies, including several Indian States, linked up under the guidance of the Conference.²

Although the main object of the Conference is 'talk' of a constructive kind, standing committees are formed to undertake practical schemes of work. The Conference was instrumental in starting the All-India Educational Fund Association, and when at the Fourth Conference this amounted to Rs. 80,000 (or about £6,000), it was agreed to devote it to the formation of a Central Teachers' Training College. Efforts to stimulate education for girls have been made by representations to provincial and local Governments,³ and a deputation from the Conference waited on the Age of Consent Committee in order to place formally before its members the views of the Conference on this most important of subjects. The Conference regards as a personal triumph the passing of the Child Marriage

¹ *Stri Dharma*, March 1930, p. 193.

² Address by Lady Tata at the Fourth All-India Conference, Bombay, 1930.

³ *Report of All-India Women's Conference*, *Stri Dharma*, March 1930.

Restraint Act, which Lady Sykes in her opening address at the Fourth Conference at Bombay compared in importance to Lord Bentinck's regulation to abolish suttee.

The Social Section has recently taken up the reform of the Laws of Inheritance as affecting women, and claims that several Bills relating to this question before the Assembly early in 1930 owe their progress to the support of the Conference.

The main aims of the Conference may be summarized as follows. As regards activities connected with education, (1) increased provision of primary and secondary education for girls; (2) adequate and improved facilities for the training of women teachers; (3) improved and greater provision of text-books; (4) improved curriculum for girls, including physical training; (5) the appointment of women to educational bodies.

Under the heading of social reform are included (1) abolition of child marriage and of unequal marriages; (2) abolition of the enforced seclusion of the purdah; (3) equal rights of inheritance; (4) prevention of polygamy; (5) prevention of enforced widowhood; (6) the equal moral standard; legislation to abolish brothels and the system of devadasis; (7) the representation of women in the Legislative Assembly, on the Provincial Legislative Councils, and on local bodies.

The programme is a comprehensive one and although the numbers of women attending the All-India Conference are as yet very small in comparison with the population (at the last Conference the number of delegates was 208),¹ yet these gatherings have caught popular imagination and focus much public attention upon women's questions.

¹ *Indian Social Reformer*, 8 March 1930.

Political Status.

The number of women enfranchised in the Governor's provinces of British India (excluding Burma) amounts to 268,000.¹ In every province except Madras the proportion of female electors to the adult female population is considerably below 1 per cent.² The qualification for women is the same as that for men, and is based not on literacy but on property. An educational qualification for men and women over 21 who have reached the fifth standard has been suggested.³

The property qualification was laid down by the Southborough Franchise Committee of 1918-19 as 'based upon the principle of residence within the constituency and the possession of certain property. Qualifications as evidenced by the payment of land revenue, rent, or local rates in rural areas, and of municipal rates in urban areas and of income tax generally.'⁴

In 1926-7 the total numbers of both sexes enfranchised for the Central and Provincial Legislatures in India amounted to 8·25 millions.⁵ The small proportion of women voters amongst these is due to the fact that the property qualification excludes a large number of women under the present system of Hindu Law. In the nine major Provinces of British India and in some Indian States women now have the vote.

A limited municipal franchise had previously existed

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 191.

² Cf. chart.

³ *Report of Indian Statutory Commission*, vol. ii, p. 93.

⁴ 'Retired, pensioned, and discharged officers or men of the regular forces are also enfranchised.' *Report of Indian Statutory Commission*, vol. i, p. 134.

⁵ *Report of the Indian Central Committee*, 1928-9, p. 36.

for women in Madras and Bombay Presidencies,¹ and the present political franchise was first granted in 1919. Representations in favour of the enfranchisement of women were made by Indian women and their societies to the Secretary of State when he visited India in 1917, to the Southborough Franchise Committee, and to the Joint Select Committee of both Houses of Parliament.

As a result of this propaganda the electoral rules of the Reform Bill were finally passed 'in such terms that if any Provincial Legislative Council should decide by a resolution in favour of women's franchise, women should be put on the electoral register of that province. This was the only provision regarding franchise matters which might be changed before a ten years' time limit. Until after that period women were ineligible for election as Legislative Councillors.'²

This latter disqualification was, however, removed in 1926, in view of the favourable recommendations of the Muddiman Reforms Enquiry Committee in all the Governor's provinces except Bengal and Assam.

A few outstanding women now hold positions of high responsibility and act as the mouthpiece for the inarticulate millions of their sex. One of the surest ways to advancement is to increase the number of such leaders. The presence of competent women on governing bodies of every kind is recognized as one of the most urgent needs of the day.

It would be impossible in this book to give a comprehensive account of the women who already hold positions on municipal committees, district boards, and educational bodies, though their numbers are as yet quite inadequate to the need. Women are not entitled

¹ *Indian Year Book*, 1929, p. 575.

² *Ibid.*, p. 576.

to vote or to be candidates for election to the Council of State, but they may stand for election in Assembly constituencies in any province where they are already eligible for election to the Provincial Legislature, i. e. in all provinces except Bengal and Assam.¹

There is so far no woman member of the Legislative Assembly of the Central Government, but several provinces have now one nominated woman member in the Legislative Council. Madras was the pioneer in nominating a woman, the distinguished Dr. Muthulakshmi Reddi,² as a result of representations made by the Women's Indian Association to the Governor. Dr. Reddi's abilities and services in medicine and in social reform were already well known, and she was appointed by the Legislative Council to the position of Deputy President. Since then she has courageously initiated legislation to abolish the system of devadasis in the temples³ as well as many other important measures.

In the United Provinces there is a nominated woman member, Mrs. Ahmed Shah, who represents the Indian Christian community. In the Central Provinces Mrs. Anusuyabai Kale has been nominated, and a woman member has been similarly appointed in the Punjab.⁴ In Bombay Miss I. Dickinson,² an Englishwoman, noted for her social work amongst women, was recently nominated.

Measures to obtain a greater number of women members are urged in the report of the Indian Central Committee 1928-9:⁵ 'We are unanimously of opinion that steps should be taken to secure the representation

¹ *Report of the Indian Statutory Commission*, 1930, vol. i, p. 223.

² Since resigned.

³ Vide chapter vii.

⁴ *Report of Third All-India Conference*, 1929, p. 15.

⁵ p. 50.

of women in the provincial legislatures. Except in the case of certain advanced parts of India it seems clear that women cannot at present expect to obtain representation to an adequate extent through the general constituencies. We, therefore, consider that in every province 5 per centum of the total seats in the provincial legislatures should be reserved for women.'

The following are some answers to points in the questionnaire dealing with the various methods of standing for election likely to succeed in the case of women candidates, e. g. standing for election in the ordinary manner, nomination, standing for separate electorates of women.

'It would be out of the question to have separate electorates for women, and it is doubtful whether in the present stage of public opinion women would be prepared to stand for election. Suitable candidates for nomination are unquestionably available, and women have been nominated to Councils and to Municipal Committees and District Boards in various Provinces.'¹

'Separate electorate for women is likely to be more successful under present conditions. Nomination will aggrandize the already advanced and self-satisfied families of the high caste men. The poor masses can gain nothing by present systems of nomination.'²

'Either separate electorates for women or nomination.'³

As regards local defects in the voting system a correspondent writes that 'by the exploitation of the illiterate, by polling officers and the agents of the rival candidates, votes are manufactured and counterfeited.'⁴

¹ R. A. Wilson, I.C.S., former Chief Secretary to the Government, Central Provinces. Answer to questionnaire.

² Bhagat Ram, Ferozabad, Punjab.

³ J. H. Lindsay, I.C.S., Former Secretary to the Government, Bengal.

⁴ Srimati Maya Devi, Bengal.

Public Service.

Since 1925 women have been appointed as magistrates, but are not yet liable to serve as jurors.¹ Two Indian women have recently been appointed members of Select Committees, Dr. M. Reddi to the Auxiliary Committee on Education of the Statutory Commission, and Mrs. R. B. Nehru to the Committee on Age of Consent. In non-official political organizations two women have held important positions, Mrs. Besant and Mrs. Sarojini Naidu, who have been appointed as Presidents to the Congress.

The suggestion has reached us that organizations might be formed in each province to mobilize the influence of women and to bring direct pressure upon Government.² No doubt this is achieved by the local branches of the All-India Conference to some extent, but the formation of sub-committees to advise Government on specific matters such as a Committee in the Punjab which advises the Department of Industries is a suggestion worth consideration.

Professional Status and Opportunity.

The scope for women in the teaching and medical professions is vast and the need for their services so great that the question of sex rivalry has never arisen in India.

Professional opportunities for women, in particular in education and medicine, owe a great debt to the work of Christian missions as well as to purely Indian movements for training women, such as the Seva Sadan. The

¹ *Report of the Age of Consent Committee*, 1928-9, p. 136.

² Srimati Maya Devi, Bengal. Mrs. Cuthbert King, Punjab. Answers to questionnaire.

numbers coming forward for such professional work, though increasing, are far too few. In 1927 only 1,952 were reading in Arts Colleges;¹ in Medical Schools 630.²

In the legal profession the disabilities of women practitioners were removed in 1923 by the Legal Practitioners (Women) Act. Women had studied law in India for many years previous to this date, but they had a very restricted field for activity as they could not practise as pleaders or vakils, and at best their interest in law was only academic.³ The most distinguished example in the profession is that of Miss Cornelia Sorabji, 'the first Indian woman to pass the examination of Bachelor of Civil Law at Oxford as early as 1892. She also obtained the LL.B. degree of the Allahabad University but was not allowed to practise. In 1904 she was appointed Legal Adviser to Purdanashin women, Court of Wards, Bengal, Bihar, Orissa, and Assam, and Consulting Counsel by the Government of Bengal.'³

The following is a brief summary by expert writers of the position of Indian women as regards Marriage, Divorce, Guardianship, and Inheritance under Hindu and Mohammedan Law.

POSITION OF WOMEN UNDER HINDU LAW IN INDIA.⁴

'General.

'In theory Hindu Law is based upon ancient writings, and it would, equally in theory, be impious to depart

¹ *Interim Report, Indian Statutory Commission*, 1929, p. 161.

² *Ibid.*, p. 163.

³ *Women in Modern India*, E. Gedge and M. Choksi, article by M. Tata, 1929, pp. 124-5.

⁴ Contributed by a distinguished member of the Faculty of Laws in the University of London who wishes to remain anonymous.

from them. And one of these writings lays it down that a woman is under guardianship all her life, and is subject to father, husband, or son, as the case may be. And in actual fact, even in these later times, the disabilities of women in matters of property are considerable. But it has to be remembered that strict Hindu Law, the law of the sacred writings, is followed in its entirety only by the higher castes, and the higher castes constitute only a minority of all those who are classed as Hindus. In the matter of freedom to remarry widows in most of the lower castes have always had a right denied to women of the higher castes.

'Marriage.

'In an ordinary Hindu marriage the reciprocal duties of husband and wife are much the same as those under our own law, but the husband has an unlimited right of polygamy, he can have as many wives as he chooses, there being no limit such as there is in Mohammedan Law. But this is of theoretical rather than of practical importance, for polygamy is seldom practised except because a first wife has not become the mother of a son or of sons. It is well known that Hindu Law forbade the remarriage of widows, but, as pointed out, that injunction was never followed by many of the lower castes. And in 1856 legislation legalized remarriage for all Hindu widows.

'Divorce.

'Again, in strict Hindu Law divorce is unknown, but among the lower castes divorce is common enough. Some castes allow it by mutual consent of the spouses, others require some sort of hearing and adjudication by a caste tribunal.

'Guardianship.

'In the matter of guardianship of infants under Hindu Law, the mother is the guardian preferred next after the father.

'Adoption.

'In the matter of adoption, except in Mithila, that is northern Bihar, males have the advantage, for a childless man, even if he be a bachelor or widower, can adopt a son to himself. But a woman may not adopt at all unless she be a widow whose husband has no male agnate descendants, and then, except in western India, her power to adopt is very restricted. The adoption, too, is always to her husband and not to herself. In much of India a widow cannot adopt unless her husband, while alive, or by a will, formally empowered her to do so. The form of adoption peculiar to Mithila can be used by both sexes, and is not so far-reaching in its effects as is the other form of adoption.

'Inheritance.

'In western India women have better places in the order of inheritance, and when a woman there inherits to a man of the family in which she was born she gets a full and absolute estate, a thing not allowed in the rest of India to a woman who inherits from a man. Among the Nayars of Malabar descent is reckoned only through the female line, and a joint family consists of the descendants of some woman in the female line, the children of the men of the family necessarily belonging to some other family. This was accompanied in former days by polyandry, but the general rule among Nayar ladies now is monogamy. But the existence of the matriarchal family puts women in a far better position

in the matter of property than they have under strict Hindu Law.

‘A Hindu man may very probably be a member of a Joint Family, and then, except in Bengal, he probably has little property which is strictly his own, he is merely a coparcener with his grandfather, father, brothers, sons, nephews, uncles, and cousins. In that case, when he dies his widow gets no property as his heir, but the family are bound to maintain her for the rest of her life. If the husband is separated from his kindred in property, then, on his death, his primary heirs are his sons, agnate grandsons, and agnate great-grandsons. The widow comes in only after them, and any one of them will reduce her position to that of a mere dependant with a right to be maintained. The daughter comes in as an heir after the widow. In most of India the sister’s place as an heir is remote, after male agnate cousins of about the tenth degree, but in western India the sister comes in between the two grandparents. As stated above, in western India a woman inheriting from a male of the family in which she was born takes a full and absolute estate. But in other cases in western India and in all cases in the rest of India, a woman inheriting from a male takes anything but a full estate. The income or produce of the estate are, indeed, hers during her lifetime. But she can deal with the body of the estate only on account of things which Hindu Law classes as “necessities”. If she sells the whole, or a part, of the estate without such a necessity the transfer holds good only for her lifetime. And, when she dies, the estate does not go to her heirs, nor can she bequeath it by will. It goes to whoever, at the time of her death, is the next heir of her husband or other predecessor, that

is to the person or persons who would take it had her male predecessor lived up to the time when she died, and had she predeceased him.'

THE POSITION OF WOMEN UNDER MUSLIM LAW IN INDIA.¹

'General.

'There is no distinction of sex under Muslim Law: as a juristic person a woman stands on the same footing as a man. As the old Arab law excluded women from inheritance, the Quran lays special emphasis on this—"To men shall be assigned a portion of what is left by parents and relatives; and to women shall be assigned a portion of what is left by parents and relatives: whether the property be small or large: a portion as determined by law."² But while the status is the same, the portions assigned are not necessarily the same, and the incidents attached to the status may differ.

'Marriage.

'Marriage is a Civil Contract. Neither a religious ceremony nor a written document is essential. The essential ingredients are proposal and acceptance and the evidence of witnesses. The registration of marriages is optional. The rules differ in different localities,³ and the registration is not necessarily under the control of the Government. Uniform rules and registering agencies might well be established throughout the country. If a Muslim Council is created to deal with social and religious matters, like the Muslim Council in Palestine, it may be possible to suggest the compulsory registration of marriages.

¹ Contributed by A. Yusuf Ali, C.B.E., M.A., LL.M. (Cantab.), Editor of Wilson's *Anglo-Muhammadan Law*, 5th ed. ² Quran, iv. 7.

³ *Anglo-Muhammadan Law*, A. Yusuf Ali, sec. 29.

‘The mutual rights and duties of husband and wife may be defined in the marriage contract, in which any reasonable stipulations will be enforceable. In the absence of any special covenants, certain rights or duties are held to be inherent in the contract. But no covenants can defeat the wife’s right to dower.¹ The woman’s juristic personality is not affected or merged by marriage. Hence neither husband nor wife is liable for the “torts” of the other, and the wife has the same remedies, civil or criminal, that any stranger would have against acts amounting to Hurt, Criminal Force, or Wrongful Restraint, as defined in the Indian Penal Code.

‘*Divorce.*

‘The husband may divorce his wife without judicial intervention, on certain conditions and with the performance of certain formalities. A wife may obtain judicial divorce under certain circumstances. A stipulation on the part of the wife, claiming the right of repudiation in certain circumstances, is valid.²

‘*Guardianship.*

‘Three kinds of guardianship are distinguished, viz.: (1) Guardianship for purposes of marriage. (2) Guardianship of person for custody and education, and (3) Guardianship of property. The first depends entirely on Muslim Law; the second and third are governed partly by Muslim Law and partly by the general law of India. As regards (1), the father and brothers take precedence of the mother and maternal relatives. As regards (2), Guardianship of person, the mother is the

¹ *Anglo-Muhammadan Law*, A. Yusuf Ali, secs. 40-59.

² *Ibid.*, secs. 60-77.

guardian of a boy till he completes his seventh year, and of a girl until the age of puberty. After these ages the father comes in. As regards (3), Guardianship of property, the father takes precedence, and he may by his will appoint such a guardian.¹

Inheritance.

‘A widow in possession has a lien on her deceased husband’s property for her dower.² Her share in her husband’s estate (real and personal) is one-eighth if he has left children, and one-fourth, and in some circumstances one-third, if not. This share is in addition to dower. Ordinarily a female’s share in inheritance is one-half the share of a male in the corresponding degree of relationship. These are general principles, but the details of the law of inheritance are complicated.³ In the Punjab and elsewhere, Muslims descended from Hindu tribes are governed by customs which exclude females from inheritance.’⁴

Some Steps towards Reform of the Law.

The above articles indicate that custom and the application of the law varies considerably in different parts of India. In practice grave injustices to women exist which it is the aim of the women’s movement and of progressive opinion to remove.

Several legislative measures to amend the Hindu law of inheritance are at the present time before the Legislative Assembly.⁵ Two committees have recently been

¹ *Anglo-Muhammadan Law*, A. Yusuf Ali, secs. 90-112.

² *Ibid.*, sec. 162.

³ See chap. viii, *Anglo-Muhammadan Law*.

⁴ Contributed by A. Yusuf Ali.

⁵ e.g. Hindu Gains of Learning Bill. Hindu Widows Right of Inheritance Bill. Bill Amending the Law of Inheritance.

appointed (in Mysore and in Baroda) to investigate the Hindu laws of inheritance with a view to making them more equitable to women.¹ The instructions of the Mysore committee are 'to examine the subject in all its aspects . . . also with reference to any recent legislation in British India in the same direction, and to submit a report indicating in what respects the present law stands in need of reform.'² Such research movements should prove an invaluable preliminary to reformative legislation.

The All-Indian Women's Conference held at Bombay in January 1930 passed several resolutions dealing with the legal disabilities of women. As regards inheritance the Conference advocated equality between the sexes, and as regards guardianship of children equal rights for mother and father. A resolution condemning polygamy was passed.

The question of divorce is a controversial one and arouses difference of opinion amongst women, but the lack of redress to the unhappy wife is a matter which is attracting some attention.³ The formation of a permanent Bureau where cases of injustice to women may be investigated with legal help might do much to hasten reform.

Conclusions.

Political emancipation is recognized as a small part of the task that lies ahead. As said by Mahatma Gandhi: ⁴ 'Women must have votes and an equal legal status.

¹ *Stri Dharma*, March 1930, p. 213.

² *Stri Dharma*, November 1929, p. 573.

³ *Indian Social Reformer*, 22 February 1930, and *Stri Dharma*, January 1930, pp. 80-8.

⁴ *Mahatma Gandhi's Ideas*, C. F. Andrews, p. 324.

But the problem does not end there; it only commences at the point where women begin to affect the political deliberations of the nation.' Where the proportion of educated women is so small, and ancient custom blocks the way to the freedom and education of the overwhelming majority, progress cannot be rapid.

The women's movement does not lack leaders at this stage, and their influence is great in proportion to their numbers. It is to be hoped that these will continue to be forthcoming as the scope of activities widens. Perhaps the most fundamental need is that of spade work. The education, health, and welfare of Indian women, urban and rural, depend ultimately on the service of members of their own sex. No provision deserves more attention nor bristles with greater difficulties than this. Facts such as the following have to be faced: that there is a shortage of 9 million women in India as compared to men; that according to the Report of the Age of Consent Committee 50 per cent. are married by the age of 15, and except among Christians the young unmarried woman is a rare exception. The vast distances, the differences of language and race, the primitive and isolated conditions under which live three-quarters of India's population, the attitude to the single and unprotected woman are all factors which have to be considered in recruiting women to the social services essential to a civilized country. 'In England we take our women workers so much for granted that one does not realize how great an asset they are to the country until faced with the problem as it presents itself in India.'¹

¹ *Contemporary Review*, November 1929. Article by Lady Hartog.

Training Facilities.

Along with recruitment of workers comes the necessity for training. Indian movements such as the Brahmo Samaj, the Parthana Samaj, the Arya Samaj, the Ramakrishna Mission, the Servants of India Society, and the Seva Sadan have, with the Christian missions, all stressed the need for social service, and some have provided training. In Bombay there is a Social Training Centre for women which combines theoretical study and practical work. The Social Service League of Bombay, whose objects are the study of social problems and the pursuit of social service, has lately arranged a diploma course for men and women.¹ A similar league initiated by Mrs. Whitehead is at work in Madras.²

In Calcutta the newly founded League of Social Service for women caters for 'general training apart from specialist courses such as midwifery or nursing which are provided for elsewhere. It is hoped to create a salaried service of women social workers who will go out from the Institute and work in the villages.'³

In a number of universities there are social service leagues. Inquiries into the extent to which social service work is undertaken in connexion with educational institutions was recently made by Sir Philip Hartog.⁴

Replies received related to '75 institutions including residential universities, affiliated colleges, and halls of residence. In 47 of these some kind of social work is being done . . . Eighteen of these institutions carry on

¹ *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 49.

² *Modern Religious Movements in India*, J. N. Farquhar, 1924, p. 424.

³ *Contemporary Review*, November 1929. Article by Lady Hartog.

⁴ *Times Educational Supplement*, 18 January 1930.

night-schools in many cases for their own servants; 17 take an active part in the Scouting or Girl Guide movement; 6 assist at local fairs or in flood relief; 10 assist in village uplift of various kinds; 5 do Red Cross work, ambulance work, first-aid or nursing; 4 or 5 are doing survey work in villages or cities.¹

Social service courses arranged in connexion with universities are urged by a correspondent.¹

The provision of salaried posts is a necessary part of social service schemes of any kind. Without some guaranteed support workers can hardly be attracted to the field of service. Propaganda in girls' secondary schools might be a means of finding recruits, and a determined campaign to enlist the vast numbers of unhappy and secluded widows should help to solve the baffling problem of the shortage of available women workers.

To sum up the main needs in considering future progress: the further extension of the franchise to women will probably be a gradual process; a shorter cut towards the advancement of the inarticulate majority is to secure their representation by competent women on governing bodies.

Further investigation into, and the amendment of the position of women under the law is required.

Pioneer efforts to provide trained women workers are to be found only in cities and in large towns. They are the early beginnings of what may become the regeneration of India and deserve all the support, moral and financial, that they can obtain. Without a colossal army of workers the women's movement cannot carry through the stupendous task to which it has set itself with so much enthusiasm and courage.

¹ Srimati Maya Devi, Bengal. Answer to questionnaire.

IV

HOME AND MARRIAGE

By A. R. CATON *and* E. MARTELLI, B.A.

ALTHOUGH psychological changes are taking place in progressive India with remarkable rapidity to-day, it still remains true that the highly educated, travelled, and emancipated women of India, although necessarily those who are in evidence, are as yet infinitesimal in number in comparison with the millions whose province is within the walls of their homes. Knowledge of these, the real womanhood of India, is by force of circumstance much more limited.

In India, marriage is almost universal amongst both Hindus and Mohammedans. Hindus may under Hindu Law marry only within the caste, although inter-caste marriages are now recognized by statute and are becoming more frequent.¹ To find suitable husbands for their daughters is a binding duty upon parents, and the wishes of those to be united have been until lately rarely considered. Although 'most parents of girls in India in settling the marriages of their children generally look to the best interests of the children . . . it does not follow, however, that the best interests of the children concerned are necessarily subserved. . . . There is no question of mutual love before marriage as an element in settling marriages in India.'² The Age of Consent Committee found that examples were not wanting, 'in which parents of all castes and communities give girls

¹ Presidential Address of Mr. H. Sarda to 42nd Indian National Social Conference, quoted *Indian Social Reformer*, 28 December 1929.

² *Report of the Age of Consent Committee*, 1928-9, p. 169.

in marriage for money payments irrespective of the girl's age or any other considerations of aptitude of the husband'.¹ In other cases a sum of money is 'paid by the father of the bride, and the sum will vary considerably with the rank of the families concerned and nowadays with the education of the bridegroom. Eligible bridegrooms, graduates for instance, engaged in professional work, require large dowries.'²

The Joint-Family System.

The joint-family system is diminishing among Hindus, and even among Muslims 'the way of living is becoming more and more individualistic',³ yet it deserves mention as the school in which the vast majority of Indian women have been trained. In a joint family four generations may be found under one roof, earnings are pooled, and family burdens, including the maintenance of widows, are borne by the group.⁴ The power of the older women is great and is not always used without harshness to the younger, but the young wife receives a training in house management and the rearing of children from these older women, who in many households give also the rudiments of education to the children. In the domestic arts under the difficult conditions thus imposed, 'the Indian woman frequently attains to a high degree of skill, tact, and resource'.⁵

¹ *Report of the Age of Consent Committee*, 1928-9, p. 169. Vide *Rusticus Loquitor*, M. L. Darling, 1930, pp. 153 and 348.

² Vide William Paton, *Social Ideals in India*, 1920, p. 21, and also *Stri Dharma*, May 1929, p. 301, in which 'the sordid custom of buying bridegrooms' is referred to.

³ *Report of the Age of Consent Committee*, 1928-9, p. 170.

⁴ *Economic Development of India*, V. Anstey, 1929, p. 55.

⁵ *Report of Calcutta University Commission*, 1917-19, vol. i, p. 133.

Position of Women in the Household.

Although the views of those with intimate knowledge of the more conservative Indian woman are in many respects conflicting and contradictory, we obtain from varied sources a definite impression of the part she plays within the household. Whatever her lack of freedom may be it is clear that the Indian woman, at any rate the mother of sons, is a dominating influence in her own home. She is described as the guardian of family life,¹ the presiding genius of the household,² the priestess of the home.³ It is even claimed that the supreme Deity is worshipped in the form of womanhood.⁴ But does this attitude apply to any and every woman, the childless wife, the widow, and the rare unmarried woman? On closer examination it becomes evident that a more precise definition is required, and that the function of motherhood rather than womanhood is the object of reverence.

According to Mr. C. F. Andrews,⁵ 'Where most modern English novels end an Indian novel would in nine cases out of ten begin. . . . While the romance of womanhood in Europe centres in early love and courtship, in India the romance surrounds the wife and mother.'

It is a fundamental and well-known fact that 'a son is the most coveted of all blessings that a Hindu craves, for it is by a son's birth in the family that the father is redeemed.'⁶ A daughter, on the other hand, is a liability, and her parents are 'tormented incessantly with

¹ *Interim Report of the Indian Statutory Commission*, 1929, p. 151.

² Presidential Address of Mr. H. B. Sarda at 42nd Indian National Social Conference.

³ *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 23.

⁴ *The Daughter of Hindustan*, J. Ghosha, 1927, p. 41.

⁵ *The Renaissance in India*, C. F. Andrews, 1912, p. 214.

⁶ *The High Caste Hindu Woman*, 1888, Ramabai Sarasvati, p. 12.

anxiety with regard to her future and the responsibilities of their position.’¹ The wife who has produced a son has therefore an established position.

A glimpse into the routine in the life of a Hindu woman in Bengal is given by Mr. Amarnath Mazumdar.² ‘The mistress of the house rises early in the morning, and after the daily wash puts on a rough silk “sari” in which she performs her daily worship. This done she settles down to the work of the kitchen. The children in the meantime have risen from their beds, and are given their morning lunch which consists of light food, such as the humble muri (fried rice) or the richer luchi (cakes of flour fried in ghee³). At about 10 the students and the officials in the family have their principal meal, consisting of rice, curry and fish. The rest of the family dine a little later and food is taken last of all by the elderly women, of whom the widows never take more than one meal in a day, which invariably excludes fish and meat. After mid-day there is a period of rest. Some of the women enjoy a nap while others talk among themselves, or with any neighbour that may turn in. . . . At about 3 there are preparations for the afternoon meal—the boys will return from school—the man from office. The afternoon meal is of the same character as the morning one, unless there is tea in addition in some families. The young men go out for a walk, or to the playground, the elder males enjoy their smoke and the pleasure of conversation with neighbours and friends in the outer verandah . . . and the women busy themselves with preparations for the evening meal. In the evening

¹ *The High Caste Hindu Woman*, 1888, Ramabai Sarasvati, p. 22.

² *Report of Calcutta University Commission*, 1917-19, vol. i, pp. 137-8.

³ Clarified butter.

very often the elderly ladies take their rosaries and say their prayers. The evening meal consists of luchi or ruti (fried bread), or rice and curry. It is generally served between 8 and 9 p.m. and the whole family retires to bed about 10 o'clock.'

Reference to the Indian woman's power of self-sacrifice was made in her presidential address¹ to the Bombay Women's Education Conference, 21 September 1929, by Mrs. Sundrabai Sirur, who stated: 'from times immemorial the women of India have led a life of sacrifice and complete self-abnegation, and they have thus not only effaced themselves but in doing so they have effaced their sex. . . . It is difficult for strangers to grasp the secret of the beauty of Indian home life' where the individuality of the Indian woman is seen in 'the atmosphere that reigns in the home over which she presides'.

The darker side to this picture must also be considered.

Early Marriage.

The custom of child marriage is perhaps the gravest of social problems in India.² It is prevalent in varying degrees in different provinces³ and communities, but generally speaking at the time of the 1921 Census—

under the age of 5, in every 1,000 girls 11 were married	
between 5 and 10, ,, ,, 88 ,,	
between 10 and 15, ,, ,, 382 ,,	

To these must be added 396,556 widows under 15, but even so, as the Age of Consent Committee's Report

¹ *Indian Social Reformer*, 28 September 1929.

² On this subject suggestions from correspondents on the raising of the age vary considerably. Many advocate the gradual raising of the age by stages, others have referred the matter to the recommendations of the Age of Consent Committee.

³ *Report of the Age of Consent Committee*, 1928-9, p. 53.

justly points out,¹ the figures greatly under-estimate the evil. The largest percentage which the Census gives is 39·8 per cent., being the proportion of girls found married or widowed between the ages of 10 and 15 to the total number of girls of that age period. This figure, calculated on an age group in which the marriage curve probably rises sharply in the higher ages, does not show what percentage of girls unmarried at the time of the Census are likely to be married before attaining the age of 15. Making allowances for this, by assuming that of the girls below 10 who were unmarried on Census day the same proportion would marry before 15 as were actually found married or widowed in the age group 10-15, the Committee reach the conclusion that the proportion likely to be married before 15 is not less than 42·2 per cent.; or, allowing for further marriages among the unmarried in the 10-15 group, that 'the percentage of girls who are married before the completion of the 15th year will probably be nearer 50 per cent. than otherwise.'¹

Even among the orthodox opinions differ as to the extent to which child marriage is enjoined by Hindu scriptures, but for many the religious sanction still amounts to an obligation.² Since, however, the proportion of Mohammedan girls married before 15 is 'about three-fourths of that of the Hindus', and since even among the Hindus child marriage appears to be considerably more frequent among the lower and depressed classes than among the higher castes, the custom cannot have an entirely religious origin. This contention is supported by the recent report of the Age of Consent

¹ pp. 94-5.

² For a discussion of the orthodox Hindu attitude vide *Report of the Age of Consent Committee*, pp. 105-12, also pp. 202-17, and pp. 38-9.

Committee, which after discussing the origins of child marriage refers to conditions in Sind, where a 'paucity of girls' is alleged as a reason for its prevalence. If this is true of other parts of India¹ it solves the problem—so puzzling to the student of Indian social questions—of how marriage can be universal in a country where, first, there is a shortage of 9 million women; secondly, there are 26 million widows few of whom remarry while all widowers do so; and, thirdly, the custom of polygamy exists to a limited extent. With this excess of men obviously all of them cannot find wives among their own contemporaries and are almost forced to seek them from the children of the next generation.

We are often told that a Hindu marriage does not imply more than an irrevocable betrothal, and that consummation may not follow for an indefinite period. The following passage from the Age of Consent Report gives a different account.² 'It is not a mere betrothal or engagement, from which the parties can break off, but an irrevocable tie which makes the couple husband and wife in the eye of the law and of the public, and after which the death of the boy leaves the girl a widow. In several castes, marriage is performed at any age before the girl attains puberty, but it is not necessarily, nor even usually, followed by consummation. At the same time, in some parts, cohabitation often takes place before the child-wife has reached the age of puberty, and almost always very soon after. In many other castes, post-puberty marriages are common.'

¹ The Age of Consent Committee reports evidence of kidnapping and a regular traffic in girls in several provinces; many are sent to the Punjab, where demand is great 'owing to the paucity of girls', p. 34.

² *Report of the Age of Consent Committee*, 1928-9, p. 92.

Elsewhere it is stated¹ 'consummation soon after puberty is almost universal among classes which practise early marriage. The maximum period that elapses after puberty rarely exceeds one year. There is a considerable number of cases, however, where it occurs within a much shorter period, and some where it follows within a few days of puberty. The fitness of a girl for consummation and possible motherhood from the physiological point of view is hardly taken into consideration.'

This practice which 'more than all else militates against the advance of widespread female education'² has terrible effects on health. In Calcutta 'between the ages of 10 and 15 years for every boy that dies of tuberculosis 3 girls die. Between the ages of 15 and 20 years for every boy that dies of tuberculosis 5 girls die. Between the ages of 20 and 30 years for each young man who dies of tuberculosis 3 young women die. . . . The most important factor in the aetiology of tuberculosis amongst girls and young women is early marriage, which subjects immature females to the strain of repeated pregnancies and prolonged periods of lactation.'³ The effect on health of early maternity is dealt with in great detail in the Report of the Age of Consent Committee, where proof is given 'that early maternity, i. e. below 16 years, complete, has a markedly deleterious effect on mother and child'.⁴

Figures supporting this view were obtained from four sources, the King Edward Memorial Hospital, Poona,

¹ *Report of the Age of Consent Committee*, 1928-9, p. 97.

² Speech of H.H. Maharani of Baroda to the All-India Educational Conference, 1927.

³ *Report on the Municipal Administration of Calcutta for 1925-6*, Pt. III, p. 19.

⁴ *Report of the Age of Consent Committee*, 1928-9, p. 161.

the Lucknow Branch of the Lady Chelmsford Maternity and Red Cross Society Child Welfare League, from an elaborate field study of the maternal mortality rate by Dr. Adishesan, Assistant Director of Public Health, Madras, and from the Child Welfare League, Nagpur.

The following facts deal with cases below 16 years of age at King Edward Memorial Hospital, Poona.¹

'Of those who became pregnant at this early age, 31 per cent. had abortions or premature labour; 17·8 per cent. showed some abnormality such as death of foetus, prolonged illness of mother after confinement, perineal tear, &c., making a total of 48·8 per cent. of abnormality.'

In the Lucknow Branch of the Lady Chelmsford Maternity and Red Cross Society Child Welfare League 35·75 per cent. of pregnancies in young mothers show abnormality. 'There are nearly $3\frac{1}{2}$ times as many still-births and neo-natal deaths in the case of girls below 16 as there are in the case of women between 20-30.'

Dr. Adishesan's conclusions showed that maternal mortality is at its maximum in the earliest ages.²

Dr. Adishesan further observed in his written statement: 'It should be remembered that proportionate to this high maternal and child mortality, there is a vast number of invalids or physical wrecks among the survivors, the significance of which should not be lost sight of on account of their being a burden to the individual families and to the community in general.'

At the Child Welfare League, Nagpur, it was found that below the completion of 16 years of age in the

¹ *Report of the Age of Consent Committee, 1928-9*, p. 162.

² The maternal mortality rate at ages 15-19 is nearly 50 per cent. lower than the rate below the age of 15.

mother 19·4 per cent. of children born were weak, still-born, or died within the first week.¹

The terrible evil of premature motherhood is further emphasized in the Report.

‘Early maternity is an evil and an evil of great magnitude. It contributes very largely to maternal and infantile mortality, in many cases wrecks the physical system of the girl and generally leads to degeneracy in the physique of the race. Let us compare the case of Sati which was prevented by legislation with the case of early maternity. Satis were few and far between. They compelled attention by the enormity of the evil in individual cases, by the intense agony of the burning widow and the terrible shock they gave to humane feelings. But after all, they were cases only of individual suffering; the agony ended with the martyr and the incident had some compensation in the martyr being almost deified as an ideal Hindu “Pativrata”, a devoted wife, the subject of adoration after death. In the case of early maternity, however, the evil is widespread and affects such a large number of women, both amongst Hindus and Muslims, as to necessitate redress. It is so extensive as to affect the whole framework of society. After going through the ordeal, if a woman survives to the age of 30, she is in many cases an old woman, almost a shadow of her former self. Her life is a long lingering misery and she is a sacrifice at the altar of custom. The evil is so insidious in all the manifold aspects of social life that people have ceased to think of its shocking effects on the entire social fabric. In the case of Sati, the utter hideousness of the incident shocked the conscience; in this case the familiarity of the evil

¹ *Report of Age of Consent Committee, 1928-9, p. 163.*

blinds us to its ghastly results. If legislation was justified for preventing Sati, there is ample justification for legislation to prevent early maternity, both on the grounds of humanity and in furtherance of social justice.’¹

The evidence of witnesses before the Committee provides much distressing detail which cannot be dealt with in this brief sketch.

One witness stated to the Select Committee,² ‘Some time ago I delivered a girl of 22 years of age of her eighth child, all children living. She died two months later of no actual disease, but as she said to me “I have no wish to live.” She was actually worn out.’

Dr. Muthulakshmi Reddi gave in her evidence the case of a girl of 11:³ ‘she was not developed, had repeated abortions and died last year.’ She adds, ‘If I were to describe to you some of my experience of some of these cases it will bring tears of blood.’

Such cases of early maternity are illegal, for although the ceremony of marriage was legal at any age prior to the passing of the recent Child Marriage Restraint Act, the age of consent had been raised to 13 within marital relations. ‘That the law at 13 is broken is positively asserted by a larger number of witnesses who are equally positive that these cases seldom come to court. The small number of cases that reach the courts have come only when there is some shocking injury to the girl. . . . The families of the girl and the husband do not want a delicate matter of family life to come to court and create a scandal.’⁴

¹ *Report of Age of Consent Committee*, 1928-9, p. 102.

² Vol. vi, p. 38, *Report of Age of Consent Committee*, 1928-9.

³ Vol. iv, p. 366, *Report of Age of Consent Committee*, 1928-9.

⁴ *Report of Age of Consent Committee*, 1928-9, p. 173.

Legislation.

Enough has been said to show how necessary is the abolition of this custom. Progressive Indian opinion is fully alive to the need, but has not always had official support against the forces of orthodoxy. In the *Report of the Age of Consent Committee* it is stated on page 102: 'Government has always been hesitant and cautious, and has acted more as a brake than as a power for advance in this matter. Both the bills are brought not by the Government but by elected members.'

Past legislative measures have dealt only with the age of consent and not with the ceremony of marriage. In 1891 the age of consent was raised from 10 (the minimum age fixed in the days of Macaulay by legislation) to 12. After an unsuccessful attempt in 1924 by Sir Hari Singh Gour to raise the age to 14 inside, 16 outside marital relations, Government brought forward an amended Bill in 1925, raising the age to 13 within and 14 outside the marriage bond.

In 1927 Sir Hari Singh Gour again introduced an Age of Consent Bill raising the age of consent to 14 within the marriage bond and 16 outside it. This was referred to a Select Committee appointed by Government to inquire into the age of consent under the chairmanship of Sir Moropant Joshi.

In 1927 also, Rai Sahib Harbilas Sarda introduced a Bill restraining the solemnization of child marriages among Hindus by declaring such marriages invalid when either party was below a prescribed age. This met with considerable opposition and was referred to a Select Committee which made radical amendments.

¹ *Report of Age of Consent Committee, 1928-9, p. 15.*

The amended Bill 'penalized husbands over 18 marrying girls below the age of 14. It also penalized the parents, guardians, and priests solemnizing marriages of such girls, or of boys below 18 years of age'.¹ This Bill was also referred to the Select Committee on Age of Consent, 1928-9.

Amongst the recommendations made by the Select Committee were these.

- (1) That the age of consent be raised to 15 years within, and to 18 years outside marital relations.
- (2) That a law be enacted fixing the minimum age of marriage of girls at 14 years.
- (3) Evasion of the law ² by those responsible to be punishable by fine or imprisonment for a duration of 10 years before the wife reaches the age of 12, or for one year after that age; but the validity of the marriage to be unaffected by contravention of the Marriage Law.
- (4) That an accurate Marriage Register be kept 'containing details of marriages including the ages of the couple, and that if it be made obligatory by law on the parties and guardians of parties to the marriage . . . to report the same to a prescribed local authority' ³ and that certificates of marriage be issued free to the parties concerned.
- (5) 'That the prescribed authority be required to maintain a register of births within a given area under its control, and to take stringent steps to enforce registration and to prosecute persons who omit to send a report within the prescribed period,' ⁴ and that birth certificates be issued.

¹ *Report of Age of Consent Committee*, 1928-9, p. 15.

² Dealing with marital misbehaviour.

³ *Report of Age of Consent Committee*, 1928-9, p. 196.

⁴ *Ibid.*, p. 197.

- (6) That aid be given to the establishment of institutions giving protection to girls.
- (7) That Women Police be employed where available to aid in the investigation of sexual offences, and that where these are not available, any respectable and disinterested women of the locality be invited to be present while the statement of the girl is being taken.
- (8) That women willing to serve as jurors and assessors be empanelled in the trial of cases of rape or of marital misbehaviour.
- (9) That where a medical examination of a girl is necessary it be carried out by a woman doctor.
- (10) That measures be adopted to give wide publicity to the Marriage and Consent Laws and to carry on an educative propaganda.

The Child Marriage Restraint Act, which came into force on 1 April 1930 (as amended by the Select Committee), prohibits and penalizes (but does not render invalid) marriages taking place where the person is under 18 if male, and under 14 if female.

It does not, however, implement the other recommendations of the Age of Consent Committee mentioned above. Until in particular the enforcement of registration, both of births and marriages, is provided for, and until much work of propaganda and publicity is done with regard to the marriage and consent laws, it is doubtful whether the prevention of child marriage is assured.

A sustained campaign will be necessary in order to make effective this long overdue legislation, and to lead eventually to a further raising of the age of consent.

*Purdah.*¹

It has been estimated that 40 million,² nearly a third of the women of India, live in seclusion behind the purdah from the age of puberty onwards.

The institution of purdah 'dates only from the period of the Mohammedan invasions some seven or eight centuries ago. The Hindus had previously no such rule of confinement, and Hindu women of old times are known to have mixed in men's society, and even to have taken part in public affairs.'³ Since it is a Mohammedan institution purdah is 'more rigidly enforced in North India. In that part of the country it has been frequently adopted by the Hindus, especially in Rajputana.'⁴

Purdah is by no means a universal custom. 'It does not prevail at all among south Indian Hindus; or among the people of Maharashtra and a large section of Gujarat, or in the Madras and Bombay Presidencies. As a result of this it is less rigid among the poor Mohammedans of south India.'⁵ Some communities continue to adopt purdah 'as a mark of growing social status and prosperity',⁶ but this is counterbalanced by the fact that in certain Indian cities such as Calcutta, Patna, Delhi, and Lahore, among educated women, purdah restrictions are rapidly breaking down, and that comparatively few of the English-educated women have known even modified purdah'.⁷ The movement is encouraged by

¹ By E. Martelli, B.A. ² *Social Ideals in India*, William Paton, 1920.

³ Shrimati Kamaladevi Chattopadhyaya, Organizing Secretary of the All-India Women's Educational and Social Conference, in *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 3.

⁴ Dr. Rukhmabai in *Women in Modern India*, 1929, p. 144.

⁵ *Ibid.*

⁶ *Ibid.*

⁷ Miss Cornelia Sorabji in the India Supplement of *The Times*, February 1930.

the example of women of high social position such as H.H. the Maharani of Baroda and H.H. the late Begum Mother of Bhopal, both of whom recently discarded the veil on public occasions.¹

'Purdah differs very much in the degree of seclusion practised in various parts of the country.'² In the villages where the peasants are usually too poor to dispense with the labour of their wives Hindu women are unrestricted, and even among Mohammedans 'women can move about on the public road and go about their outdoor work with a veil over their faces. If rich they can use curtained conveyances, and social intercourse of a restricted kind is not denied to them. . . . On the other hand purdah may be so rigid that a woman may, among the poor, be confined to a small house, practically windowless or with openings high up in the walls, and she may not leave the house even to fetch water for household purposes. However poor the household, she can take no share in the work, except for the cooking which she can do indoors. It has been said that a Rajputani may not leave her house to fetch water though the house may be in a jungle and the well in front of it!'³ On the whole, however, 'purdah has pressed least hard on the very poor and on the rich. For the rich there would be alleviations, air and light were not denied them, in the physical or in the cultured sense. . . . For the poor the demands of hard necessity often raised the veil.'⁴ 'It is upon women of the middle classes that the institution bears hardest,'⁵—those who

¹ Lady Tata, opening address to the 1930 session of the All-India Women's Educational and Social Conference.

² Dr. Rukhmabai in *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 145.

³ Ibid.

⁴ Ibid.

⁵ Lady Tata, opening address to the 1930 session of the All-India

for the sake of conventional respectability adopt it in its most rigid form without having the means to render the seclusion healthy or even tolerable.¹

Whatever the extent of purdah a girl coming to maturity under such conditions 'will never have the robust figure of the open-air child'. If the father is educated he may send her to a purdah school and delay her marriage till she is 17. But after marriage 'her occupations may be summed up as a round of routine, cooking, housework, if she does her own, and perhaps embroidery. Her recreation . . . may be occasional visits to the houses of other women, by secret tracks over the flat roofs in the heart of a city; or shrouded in a great sheetlike garment covering her entirely from which she can peep but cannot herself be seen, through village paths, after dusk, and accompanied by a servant. Many have told me they never go out before dark. If she belongs to a high-born family, she probably never goes out at all.'²

True this limitation of liberty has not, for Mohammedans at least, affected some of the privileges of women. A Muslim lady has said 'we are as much mistresses of our homes as we could have been if purdah was never introduced. Our control over the menfolk, the children, and the servants is as complete as those of the women of any other country. The fact that we observe purdah makes our men more considerate towards us.'³

Women's Educational and Social Conference. Dr. K. Vaughan also states that purdah affects most harmfully the educated classes. *The Purdah System and its Effect on Motherhood*, 1928.

¹ *Tuberculosis in India*, A. Lankester, M.D., 1920.

² Mrs. Underhill (Starr), late Matron of the Mission Hospital at Peshawar, Memorandum to the Women of India Survey.

³ Mrs. Razaullah, Memorandum to the Women of India Survey.

Nor does seclusion necessarily involve a life wholly devoid of interest. The women in a wealthy Mohammedan joint family take a justifiable pride in their fine cooking or in such family concerns as the sewing of a trousseau for a coming bride. There are even instances of such women proving very efficient managers of estates which they hold in their own right. Yet to the majority for whom these amenities are not available there must remain 'the dull monotony, the restrictions and the lack of occupation'¹ which absence of contact with the world involves.

Opinions vary as to the degree of 'starvation of the mind'² which purdah involves; Lady Tata maintains that 'there are a hundred reasons why Burma, Bombay, Madras, Baroda, Mysore, and Travancore have the largest proportion of literate women in the Indian Empire. But the most important of them, to my mind, is that women in these provinces are largely free from the hindrances of purdah.'³ The forced inactivity of women is as serious for society as it is for the individual. 'Voluntary social enterprise has lagged behind in India as compared with other countries and in India itself those provinces where purdah prevails are far behind those where women have been able to do organized social work.'⁴

However the disadvantages of purdah may be mitigated, the custom is maintained only at an appalling

¹ Mrs. Underhill, Memorandum to the Women of India Survey.

² H.H. the Maharani of Baroda. Presidential Address to the All-India Women's Conference on Educational Reform, 1927.

³ Opening Address to the 1930 session of the All-India Women's Educational and Social Conference.

⁴ Dr. Rukhmabai in *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 146.

price in health. An Indian lady doctor has said that 'the experience of doctors working among these *purdahnashin* women is a tragic revelation of numberless cases of tuberculosis, stunted growth, disease, both among the women themselves and their children'.¹

Her statement is borne out by the Health Officers' Reports in many towns. In Calcutta in 1913 'the death rate amongst females was 39·4 per thousand as compared with 24·3 amongst males. In ward 24 it reached the terrible figure of 48·2 per thousand. In no fewer than 6 wards it was over 40 per thousand. . . . These figures constitute a terrible indictment of the *purdah* system. Surely the women of India have a claim to demand the abolition of the custom which means premature death to so many of them. Intolerably bad as the housing conditions are in many of the slums of Calcutta, it is only when the inmates are constantly exposed to these insanitary surroundings day and night that they suffer so severely. . . . To secure privacy, efficient lighting and ventilation are absolutely disregarded, the *zenana* or women's apartments being usually the most insanitary part of the house. No wonder that tuberculosis, which thrives in damp, dark, airless corners, plays havoc in the *zenanas*.'²

Dr. Lankester, who conducted a two years' inquiry into the prevalence of tuberculosis in India, states that in the course of his tour through the cities of India no single fact was more constantly brought to his notice

¹ Dr. Rukhmabai in *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 145.

² Annual Report for 1913 of Dr. H. M. Crake, Health Officer of Calcutta, quoted by Dr. Lankester in *Tuberculosis in India*, p. 141. Recent reports on the Municipal Administration in Calcutta echo this view, cf. Report for 1925-6.

by ceaseless reiteration than the direct dependence of consumption upon the system of purdah seclusion of women.

'In many cities of India more than twice as many women as men suffer from consumption. . . . In Calcutta 45 per cent. of the total deaths from phthisis occurred (in 1913) amongst women, although those constituted only 33 per cent. of the population. . . . The phthisis death-rate for Mohammedan women was 5·8 (per mille) as against 3·0 for Hindus and in one crowded Mohammedan ward it reached the startling figure of 12·8 per mille.'¹

Consumption is not the only disease whose ravages are directly attributable to the seclusion of women. 'It is necessary to point out to those in authority that the present working of the purdah system by depriving the girls and women of sunlight is directly responsible for the production of osteomalacia, gross pelvic deformity, and the deaths of thousands of mothers and children in child-birth annually.'²

Another grave problem of the system is the secrecy which covers evils which may occur behind its walls. A letter by an Indian Rani to *The Times* is quoted in *The Indian Moslems*.³ 'I am an Indian Rani who has endured

¹ *Tuberculosis in India*, A. Lankester, M.D., 1920, pp. 136-40. Dr. Lankester found that in districts where both Hindus and Mohammedans keep their women in seclusion the latter suffer less from consumption owing to their superior physique and the fact that they eat more nourishing food.

² *The Purdah System and its Effect on Motherhood*, Dr. K. Vaughan, 1928, p. 38. Dr. Vaughan attributes most of the trouble in childbirth in India to the purdah system. The anaemia of Indian women in purdah is reminiscent of the 'declines' which our own Victorian 'purdah' produced, the bone diseases of rickets from which our own women and children suffer through lack of air and sunlight in the slums.

³ *The Indian Moslems*, by an Indian Mohammedan, 1928, p. 218.

years of misery behind the purdah, and I know what I am talking about when I tell the British public that, as things stand at present, we women are voiceless. Suppose, for instance, that a Rani were with her own eyes to see her child poisoned? Could she insist upon a post mortem? Would her voice of agonized sorrow at the deed ever penetrate beyond the purdah?' . . .

The Rani suggests a Bureau in order that individual cases may be investigated with the aid of legal women members, so that, 'hitherto suppressed knowledge might be gained by those who have worked in Zenanas.'

Undoubtedly there is in India a growing realization of these facts and Indian women themselves provide the strongest witness to the strength of the anti-purdah movement. At the All-India Women's Educational and Social Conference the speakers, all women, insist that 'if women are to take their part in the raising of the tone of social life, if they are to understand the duties and responsibilities for which their sons must be trained, the purdah must go. If women are to have that freedom of mind and variety of interests without which there can be no joyous life, the purdah must go. . . . It is for us to arouse such a public opinion, such public support that the few who would oppose us would be overwhelmed.'¹

There is a conflict of opinion as to the method of dealing with the evils created by purdah. Some writers are impatient of the slow and laborious methods of education which, they maintain, 'are an ineffective means of dealing with the strongly conservative influence of the older women in the house,' who are the great retarding factors in these reforms. On this view

¹ H.H. the Maharani of Baroda. Presidential address to the All-India Women's Conference on Educational Reform, 1927.

'a sweeping change through legislation would finally be a simpler matter than cautious attempts at compromise.'¹ The case of Turkey inspires this view. Others, fearing disaster from a sudden social change of such magnitude, and thinking possibly of failure of attempts at enforcing such means in Afghanistan, are equally clear that a wider education is needed, both for men and for women, before purdah can be finally abolished.

Progress is being made, 'though with painful slowness in the attempt, to increase the speed of education within purdah.'² It would be impossible here to enumerate all the agencies engaged in such work or the methods adopted, but one may note the existence of Christian Zenana teachers and home education classes, of purdah day schools and of institutes for educating purdah ladies such as the two in Gujrat 'which are proving popular and economical and could be carried out more generally.'³

It has been found possible, too, to use the Girl Guide movement in this work. Mrs. Underhill speaks of a school 'where purdah girls both Hindu and Mussulman, who have never left their city, have recently been taken out to camp for three weeks in the forest.'⁴ In addition there are now, in many places, purdah clubs with facilities for games and social intercourse.⁵ At present

¹ Dr. Rukhmabai in *Women in Modern India*, E. Gedge and M. Choksi, 1929, p. 148.

² *Ibid.*, pp. 146-8.

³ Mrs. Cuthbert King, President of the Gujrat (Punjab) Centre of the Red Cross Society. Answer to questionnaire sent by Women of India Survey.

⁴ 'Women and New Movements in India', *Journal of the East India Association*, January 1930.

⁵ *Women in Modern India*, p. 147.

'lack of workers and suitable literature are the difficulties in the way of educating adult women in purdah. The organization of adult purdah education needs a most extensive sort of propaganda depending on the inherent tendencies of the women themselves rather than on any innovation introduced by the propagandists.'¹

That the difficulties can be surmounted to a large extent is shown by the work of Saroj Nalini Dutt, founder of the Mahila Samiti² movement in Bengal, referred to elsewhere. The provision of such meeting-grounds for women together with some form of adult education should help to rouse from their seclusion and inactivity the vast numbers who are at present untouched by the great uprising of women in India. H.H. the late Begum of Bhopal declared 'that the present strictness of the purdah system among the Mussulmans does not form part of their religious obligations. . . . The Mussulmans should coolly and calmly reflect and decide whether by respecting a mere custom they would keep their women in a state of suspended animation.'³ To bring education behind the purdah, and above all to educate public opinion in order that the custom may be abolished, are the outstanding needs.

Position of Widows.

As probably fifty per cent. of Indian girls are married before the age of 15⁴ and frequently to men greatly their

¹ Srimati Maya Devi. Answer to questionnaire.

² i. e. Women's Institutes. A beautiful account of Mrs. Dutt's life has been written by her husband, G. S. Dutt, I.C.S., *A Woman of India*, Hogarth Press, 1929.

³ *Report of the All-India Women's Conference*, 1928, p. 28.

⁴ *Report of Age of Consent Committee*, 1928-9, p. 53.

senior, it is not surprising that the number of widows in India is large. Widowers almost invariably remarry, and owing to the custom of early marriage and the prohibition of widow remarriage amongst Hindus, there is often great disparity in age between husband and wife. In 1921 the Census Report shows 26,834,838 as the total number of widows¹ and amongst these were 15,139 child widows under the age of 5, and 396,556 under the age of 15.

The position of the Hindu widow a generation ago was a terrible one. In 1888 Pandita Ramabai wrote: 'Throughout India, widowhood is regarded as the punishment for a horrible crime or crimes committed by the woman in her former existence upon earth. . . . Disobedience and disloyalty to the husband, or murdering him in an earlier existence are the chief crimes punished in the present birth by widowhood. If the widow be a mother of sons, she is not usually a pitiable object; although she is certainly looked upon as a sinner. . . . The widow-mother of girls is treated indifferently and sometimes with genuine hatred, especially so when her daughters have not been given in marriage in her husband's lifetime. But it is the child-widow or childless young widow upon whom in an especial manner falls the abuse and hatred of the community as the greatest criminal upon whom Heaven's judgement has been pronounced.'²

At the time of the Census of 1911 it was stated: 'Widows, especially those who lose their husbands while they are very young, are generally treated as family drudges and, being supposed to be practically dead to the world, are

¹ *Census Report*, 1921, vol. i, part ii, page 46.

² *The High-Caste Hindu Woman*, Pandita Ramabai, pp. 69-70.

expected to lead a life of absolute self-denial and to content themselves with the coarsest food and only one meal a day.¹

The Hindu widow is still to be seen with her coarse single garment and shaved head. Her position in her late husband's family has hitherto been one of dependence, and of menial joyless drudgery in return for maintenance. The custom has been to regard a widow as 'a thing of ill-omen, to be cursed even by those who love her. That she accepts the fact makes it no less of a hardship.'²

It is to be hoped that this attitude is being modified to some extent, but in 1927 Kumar Garganand Sinha³ stated in the Legislative Assembly: 'I shall not take the time of the House by narrating what Hindu widowhood means. There is no Hindu who does not know it from practical experience in his household. It is a life of agony, pains and suffering, and austerity. It is a life which has been inflicted not so much by Providence, not so much by the Shastras, as by social customs.'

Sister Subbalakshmi, Superintendent of a Widows' Training Home in Triplicane, writes, in reference to child widows:⁴ 'They are made to feel that their existence is a waste, they are a burden on earth and that the sooner they die the better for them. They are denied every kind of enjoyment and pleasure and there is absolutely no interest for them in life and no purpose at all.'

¹ *Census Report*, 1911, vol. i, part i, p. 219.

² *Between the Twilights*, C. Sorabji, 1908, p. 144.

³ *Legislative Assembly Debates*, 15 September 1927.

⁴ Answer to questionnaire.

Reformative Movements.

Now that the joint-family system is said to be disintegrating¹ the position of the widow will become an insecure one. Fortunately the work of reformers who have espoused her cause is showing its fruits in many towns of India, in the provision of training institutions of various kinds.

The various lines of reform initiated fall roughly under three headings, (1) the right of widows to marry, (2) provision of training facilities, (3) the right to inherit property.

To provide for the first of these reforms, the Widows Remarriage Reform Act was passed in 1856 at Lord Dalhousie's instigation. It is evident, however, that the volume of opinion against remarriage is still strong.² Many Indian reformers, notably Sir Ganga Ram, have taken active steps to promote widow remarriage, and at the time of the Census of 1921 a considerable number of societies had been formed in different parts of India with the avowed object of encouraging the remarriage of widows.³ 'One of the most successful of these has its head-quarters in the Punjab. . . . Similar societies exist in Bengal, Bombay, and S. India, while the Arya Samaj and other protestant religious sects are attempting to free the community from this obsolete restriction.'³

Amongst Mohammedans the position is otherwise. 'The proportion of widows in the Mohammedan com-

¹ Presidential address of Mr. H. B. Sarda to 42nd Indian National Social Conference.

² *The Daughter of Hindustan*, J. Ghosha, p. 86; *Women in Modern India*, p. 129; cf. also *Age of Consent Committee's Report*, p. 171.

³ *Census Report*, 1921, vol. i, part i, p. 161.

munity who find second husbands is, at any rate in Bengal, extremely high'.¹

'A Mohammedan widow is not treated differently in respect of food and clothing. . . The only restriction laid on the widow, of whatever age, is known as Iddatt, i. e. a period of waiting extending to a period of 4 months and 10 days after the death of the husband. This is to ensure that she is not pregnant.'²

The attitude of progressive Indians is shown in the presidential address of Mr. H. B. Sarda to the 42nd Indian National Social Conference, December 1929. 'Widow remarriage should become as general as widower remarriage at present is. If marriage is a sacrament, and can be performed only once in life, why is a widower allowed to perform it a second, a third, or a fourth time when a widow is not so allowed?'³

The second method of assisting widows, that of education and training for work, has always been recognized as by far the most important and constructive of measures. Grave moral dangers beset the widow,⁴ and without opportunity for some degree of economic independence her position is a desperate one. Institutions are to be found in most provinces providing training of various kinds. Some turn out highly educated professional women, others provide some simple handicrafts by which the helpless and friendless widow may become self-supporting. The numbers of such institutions are not recorded and mention can only be made of such outstanding homes as the Sharada Sadan, Bombay, founded by Pandita Ramabai, and the Mukti

¹ *Census Report*, 1921, vol. i, part i, p. 163.

² Mrs. Razaullah, Delhi, answer to questionnaire.

³ *Indian Social Reformer*, 28 December 1929, p. 273.

⁴ *Report of Age of Consent Committee*, vol. vi, p. 219.

Sadan, a village community of widows near Poona, the institution for widows founded at Lahore by Sir Ganga Ram, Professor Karve's Home School for Widows at Poona, and the Seva Sadan founded by Mrs. Ramabai Ranade and Mr. G. K. Devadkar. In Bengal a Widows' Training Home has been founded by Lady Bose.

Such training facilities attract as yet an infinitely small number of the 26 million widows of India. Figures are not obtainable, but it is questionable whether 100,000 widows receive training. Some 25,900,000 are probably living austere lives of domestic drudgery. It is hoped that the repercussions of the women's movement will eventually reach them also and help them to play their part. According to Lady Hartog,¹ 'propaganda to persuade parents and guardians of widowed girls to allow them to take up a career of their own is evidently making headway.'

Thirdly, reforms as regards the widow's right to inherit property are receiving consideration.

In his presidential address to the 41st Indian National Social Conference, 1928, Mr. M. R. Jayaker stated that legislation is 'most urgently needed to-day in improving the position of the widow in a Hindu joint family. When the husband dies undivided we are all aware of her miserable lot. She cannot get her husband's share if she is without male issue. The rules under which maintenance is decreed to her are unjust. They all lean in favour of her husband's co-parceners.'

A Bill² enabling widows to inherit some share in the

¹ Article in *Contemporary Review*, November 1929.

² Hindu Widows Right of Inheritance Bill, before the Assembly, February 1930.

property of their husbands was introduced in September 1928 in the Central Legislature by Mr. Sarda, who stated to the 42nd Indian National Social Conference, December 1929, in reference to the widow, 'as soon as her just right in family property is secured to her by law, most of her troubles will be over.'

It is to be hoped that these and other measures, including freedom from the control of her husband's male relatives,¹ together with opportunities for useful service, will in course of time make this depressed class of womanhood one of India's most valuable assets.

Conclusions.

The main constructive points which emerge from this chapter must now be summed up.

1. *Early Marriage.* This custom is recognized as a social evil of the gravest kind. If the recent legislation for its abolition is to be efficient it will require many supplementary measures, such as registration of births and marriages, and better machinery for dealing with cases of evasion. Much public education is also necessary in order to make the Act effective, and to encourage further legislation.

2. *Purdah.* In addition to inflicting serious disabilities upon women and conditions injurious to health, purdah is a formidable obstacle to education. Suggested remedies take the form of (a) education by means of Women's Institutes and other facilities, (b) propaganda to educate public opinion, (c) legislative measures to abolish the custom.

3. *Position of Widows.* Some improvement in the

¹ Inspectress of Girls' Schools, North-West Frontier Province, answer to questionnaire.

position of the Hindu widow is slowly and gradually being effected by means of (1) legislation enabling her to marry again and to inherit property, (2) provision of training facilities for work enabling her to achieve economic independence.

The growing need for women workers may soon create an urgent demand for the services of these women, for which far more adequate provision will be necessary than that existing in the present isolated and small training homes. Education of public opinion should remove the present superstition with regard to their employment.

V

WOMEN IN RURAL LIFE

By A. R. CATON

Extent of Village Life.

ONE-SIXTH of the human race¹ lives in the remote villages of India. 'Flat-roofed mud plaster dwellings, here and there a two-storied red-brick house, a few old trees, a Hindu temple, a Jain shrine or a holysymbol, surrounded by arable pasture and waste land—such is the Indian village. . . . Women covered with draperies of many hues walk from the well with tall earthenware jars or brass pots on their heads, and a little child in their arms.'²

These primitive village communities constitute the real India, and their inhabitants compose more than three-quarters of the total population. In spite of vivid contrasts of race, climate, and scene, different regions of India have this one quality in common—an immense preponderance of rural conditions of life.

The proportion of town dwellers varies, however, in different provinces, e.g. from 22·9 per cent. in Bombay to 3·2 per cent. in Assam.³ But of the total 247 millions of British India only 12·9 per cent. live in towns, of which there are 2,100 with a population of between 5,000 and 100,000, and 29 cities with a population of 100,000 and over.⁴ Of the rural population over 179,000,000

¹ *Village Schools in India*, Mason Olcott, 1926, p. 1.

² *Living India*, S. Zimand, 1928, p. 10.

³ *Census Report*, 1921, vol. i, pt. i, p. 64.

⁴ *Interim Report of the Indian Statutory Commission*, 1929, p. 37.

live in villages with less than 2,000 inhabitants, and the number of villages is nearly half a million.¹ The rural population is composed of the landlords, the cultivators or ryots, and the field labourers.

Conditions of Village Life.

‘Almost everywhere in India it would appear that from time immemorial the people have lived in small villages, the mud houses of which are huddled together in a more or less compact area situated in the midst of the fields which provide the means of livelihood to their occupants.’² These villages vary in size from ‘a hamlet of half-a-dozen huts to a close-packed community of 5,000 persons’.³ The isolation of rural life is great. ‘Only a very small proportion of these villages are touched by the railway or by metalled roads. The vast majority of them are approached by unmetalled roads or winding paths between the fields, the former usually impassable or almost impassable by wheeled traffic after rain, whilst the latter cannot afford passage to a wheeled vehicle at any time.’⁴

Share of Women in Rural Life.

Increasing attention is given in official reports to the potentialities of women in rural life, and to the part which they might play by their influence on education, particularly as regards the coming generation,⁵ on welfare in the home and village, and on general rural

¹ *Interim Report of Indian Statutory Commission*, 1929, p. 37.

² *Report of Royal Commission on Agriculture*, 1928, p. 5.

³ ‘Co-operation and the Rural Problem of India’, C. F. Strickland, *Quarterly Journal of Economics*, May 1929.

⁴ *Moral and Material Progress of India*, 1927-8, p. 90.

⁵ *Royal Commission on Agriculture*, 1928, p. 522.

development. From the brief references to the village woman scattered through publications on Indian rural questions it is clear that her life is an arduous one mostly spent in drudgery performed under unwholesome conditions in the unsanitary village and dark airless hut. Her field work is perhaps the healthiest and best part of her life. She suffers during child-birth from the terrible conditions described in chapter ii. Although responsible for the care of the children which she bears at too early an age, she has little knowledge of their care or of hygiene. Educative facilities for girls and women are almost non-existent in rural India, yet the elevation of village women can only be attained by bringing educational opportunity in its broadest and most utilitarian sense to their doors. The difficulties of this task, notably that of bringing women instructors to the villages, is discussed elsewhere.

The conditions of home life existing in Punjab villages are described by Mr. C. F. Strickland, former Registrar of the Punjab Co-operative Department,¹ as follows: Peasants' houses . . . 'are seldom provided with a window, admitting air and light by the door only, and open on to a confined courtyard, in which the farmyard animals of every kind are stabled and in which their manure accumulates. The narrow, winding lanes are unpaved, and serve as outlets for rain-water in wet weather and for other effluents in dry.' With less detail similar conditions of squalor are described in the report of the Commission on Agriculture as being generally prevalent.²

The activities of rural women are varied and begin at

¹ *Empire Review*, August 1929.

² *Abridged Report of Royal Commission on Agriculture*, 1928, p. 56.

an early age. In *Village Education in India*, the Report of a Commission of Enquiry, 1920, page 68, it is stated: 'The girl is a very busy member of the Indian village home. She draws the water from the well, pounds and winnows the rice or other cereal for food, gathers firewood, cleans the house, and in every interval of freedom from these duties carries on her hip the inevitable baby of whose care she is almost entirely ignorant.'

In the matter of thrift the customs of rural women certainly require improvement. 'In India jewellery has been the average person's bank which yields no interest' and unfortunately 'a woman's social standing is largely determined by her jewels'.¹ But it is not only her social standing which is affected, however, for, 'in a country² in which women are bought and sold, it can be understood that her position is highly insecure. A quarrel may lead to separation, or her husband's death may leave her an unprotected and penniless widow with no right to any share in his estate.'¹ As an alternative to this unproductive form of insurance which yearly absorbs vast quantities of precious metals,³ the suggestion has been made that women should be given the right to be independent holders of Post Office Savings Certificates, the Government to issue special certificates to be held by women only.⁴

Turning to the agricultural duties of women in the

¹ *The Punjab Peasant in Prosperity and Debt*, M. L. Darling, 1925, p. 64.

² Mr. Darling refers to the Punjab and to the custom in certain rural districts of purchasing brides, Cf. *Rusticus Loquitor*, M. L. Darling, pp. 153 and 348.

³ The amount of precious metals absorbed in India in 50 years exceeds £500,000,000, a sum 'nearly sufficient to pay off the whole agricultural debt of the country.' *The Punjab Peasant in Prosperity and Debt*, p. 65.

⁴ Address by Sir A. Chatterton, East India Association, London, 20 May 1930.

Punjab 'the wife of the Jat or the Arain does almost as much as her husband and sometimes more. . . . The Jat and the Arain go off to their fields at dawn, and at 10 o'clock their wives bring them their breakfast. . . . "A Jat wife for me—all the rest are a mere waste of money", says the Multani proverb. She does not plough, dig, or drive a cart, but there is no other form of agricultural labour which she does not practise and ordinarily adorn.'¹

In Bengal 'in the agriculturist's family the women are found freely to assist the men in field work, sowing the seeds, weeding, or assisting their husbands in irrigating. In Behar, where the pressure of population has led the males to emigrate to Bengal for work, the woman leads a more secluded life, seldom taking an active share in outdoor work, and the seclusion is greater as the family is richer or the caste higher. Agriculturists' wives will on no account come to the fields in which their husbands work, the breakfast being brought there by infant girls or old females, usually the mother. As a rule females do not work in the fields except the very old or very young who are sometimes deputed to tend cattle in plots. . . . But the women may be sometimes seen employed in threshing out the grain, winnowing, or stacking the hay. In her house, however, the woman works the whole day. She cooks the food and makes all necessary preparations for that process. She has also to grind the wheat or the pulses . . . or husk the rice. . . . and if she has any leisure she spins cotton or silk threads . . . If it is an artisan's family, the woman can assist in the husband's work more materially. The weaver's wife cleans the thread and arranges the warp and woof. . . The oil-presser's wife

¹ *The Punjab Peasant in Prosperity and Debt*, M. L. Darling, 1925, p. 38.

manages the bullocks. The silk rearer's wife . . . feeds the cocoons. The tailor's wife uses the sewing-machine when there is hard work for the family. The laundress herself washes the clothes in the tanks. The bangle-man's wife makes a slow fire and rolls the lac rods. . . . The Muchi's wife helps her husband in the collection of hides and skins. The Dom woman weaves the baskets. The potter's wife collects and prepares the clay. In some cases again, the woman does much of the labour of carrying the goods for sale at the market. . . . The fish woman is better at bargaining than her husband. The laundress carries the clothes to the Zenana. The milk woman and the oil-presser's wife also carry their products.'¹

Elsewhere, however, we are told: 'In a great part of the delta the part taken by women even in agriculture is very small, because the physical conditions are held to forbid it. Women plough only rarely. They do not as a rule transplant paddy where the water is deep. They take part in the reaping, but continuing only to the extent of tying and gathering sheaves. They do not as a rule undertake the thrashing.'²

A great deal of time and energy is spent by rural women in unremunerative drudgery.

'The principal agricultural duty of women in India is still, as it formerly was in England, the making of dung-cakes for fuel. Two hundred years ago this wasteful practice was common in our country, and the less excusable here, in that there was no scarcity of wood to burn. Many parts of India, especially in the northern plains, have been denuded of all timber by man, the camel,

¹ *Foundations of Indian Economics*, R. Mukerjee, 1916, pp. 30 and 31.

² *Census*, 1921, vol. i, part i, section vi. *The Occupations of Women*, p. 276.

and the goat, and the precious manure of the farmyard which would restore vigour to the exhausted field is, consequently, consumed on the hearth. Women and girls, even tiny creatures which can scarcely feed themselves, are daily occupied in patting cowdung with their hands into flat cakes and plastering them on the walls to dry.’¹

In India only about one-third of the women as compared to two-thirds of the men are described as ‘employed’. It has been pointed out,² however, that although custom may be an important cause, ‘the apparent want of employment of female labour’ is partly due to the classification of occupations by men who do not include among these the more domestic duties of ‘grinding of grain, drawing water from wells, taking food to their families in the fields’, &c.³ And that, ‘whether villager or nomad the woman is the universal hewer of wood and drawer of water.’⁴

But we are forced to conclude that the occupations of rural women are confined in the main to unskilled, laborious, and often useless toil, and that in the more skilled occupations ‘there is a vast waste of female labour due primarily to custom and prejudice.’⁵

Problems of Rural Life.

Poverty is the most fundamental and widespread of India’s problems. There exists a ‘vast amount of what can only be termed dangerous poverty in the Indian villages . . . of such a kind that those subject to it live on the very margin of subsistence.’⁶ Millions never

¹ *Empire Review*, August 1929, p. 114.

² *Economic Development of India*, V. Anstey, 1929, p. 63.

³ *Census Report*, 1921, vol. i, part i, p. 240.

⁴ *Ibid.*, p. 277.

⁵ *Wealth and Welfare in the Punjab*, H. Calvert, 1922, p. 207.

⁶ *Moral and Material Progress of India*, 1927–8, p. 97.

obtain a full meal in the course of the year, and necessities of life are reduced to the minimum. The possessions of the ryot are described as follows: 'His mansion is a mud hut with a roof of sticks and palm leaves; his bedstead, if he has one, consists of twisted sticks which raise his mattress, if he has one, six inches from the ground. He has no . . . windows to his hut.'¹

In two Deccan villages Dr. Harold Mann, Director of Agriculture, Bombay, discovered in the course of an investigation that 65 per cent. and 85 per cent. of the families were insolvent to the extent of being unable to buy the necessities of life without incurring greater debt.²

What are the causes of this general grinding poverty? The soil of so vast a country has naturally great variety in agricultural properties, but taken as a whole it is not potentially less fertile than that of other countries,³ though the yield is greatly inferior. The value of India's average yield per acre has been computed to be half that of Italy, two-fifths that of France, one-third that of Egypt, and only a quarter that of Japan.⁴

Experts find that this low fertility is due to many causes, the chief of which can only be referred to here. They may be summarized under the following headings:

1. Agricultural defects due (a) to climatic causes, such as the uncertain vagaries of the monsoon; (b) to traditional methods of cultivation with primitive implements, and inferior seeds and cattle; (c) to the lack of fertilizers owing to the utilization of cowdung as fuel.⁵

¹ *Happy India*, Arnold Lupton, 1922, p. 39.

² *Land and Labour in a Deccan Village*, H. Mann, 1921.

³ *India, the New Phase*, S. Reed and P. R. Cadell, 1928, p. 9.

⁴ *Encyclopaedia Britannica*, 11th edition, xv, p. 197, quoted in *Village Schools in India*, M. Olcott, 1926, p. 16.

⁵ *Abridged Report, Royal Commission on Agriculture*, 1928, p. 25.

2. Problems of population,¹ its pressure on the soil, together with the practice of subdividing inherited holdings into minute uneconomic units; and the condition of chronic under-employment of the cultivator for a large part of the year,² varying locally, but generally amounting to 'at least from two to four months absolute leisure'.³

3. Thriftless customs. Wasteful expenditure on ceremonies, jewellery, and litigation; chronic indebtedness to money-lenders.

4. Loss of personal efficiency 'from preventable malnutrition and disease.'⁴

As regards this last question, in the *Report of the Royal Commission on Agriculture*⁵ it is stated:

'Malaria slays its thousands and lowers the economic efficiency of hundreds of thousands; plague and cholera sweep the country from time to time; hookworm disease, kala-azar, and diseases arising from diet deficiency insidiously reduce the labour power of the cultivating classes.'

The Report goes on to state that not only 'better farming' but 'better living' is necessary . . . 'A deliberate and concerted effort to improve the general conditions of the countryside' is essential, and while the initiation of such measures rests with the Government no result will be effected 'unless the cultivator has the will to

¹ Large rural districts in India have a population of over 600 per sq. m. Improvements of productivity have previously always resulted in the maintenance of a larger population at the old or slightly improved standard. *Economic Development of India*, V. Anstey, 1929. Pp. 40, 474.

² *Mahatma Gandhi's Ideas*, C. F. Andrews, 1929, p. 151.

³ *Report of Royal Commission on Agriculture*, 1928, p. 566.

⁴ *Moral and Material Progress of India*, 1927-8, pp. 99.

⁵ p. 482.

achieve a better standard of living and the capacity, in terms of mental equipment and of physical health, to take advantage of the opportunities which science, wise laws and good administration may place at his disposal.¹ Co-ordination of the various movements at work to remedy such conditions is, therefore, one of the keynotes to success.

Rural Local Government.

Since the inception of the Montagu Chelmsford Reforms in 1920 enhanced status and responsibility have been given to local self-government by the formation of such administrative units as village panchayats,² union boards, and union committees, the units including more than one village in some cases.³ This revival of an ancient system is said to be 'breathing new life into local self government,'⁴ but the interest in matters of such paramount importance as public health and sanitation is as yet little developed amongst these new bodies.⁵

Rural leadership is a great need. 'No one corresponding to the squire, the doctor, and the parson is to be found in an Indian village.'⁶ An educated leader is rarely forthcoming. The educated man is not willing to live his life in a village except in a few cases where ideals of social service overcome the absence of social amenities.⁷ Better roads are a first essential if educated workers are to be drawn to the villages.⁸

¹ *Abridged Report, Royal Commission on Agriculture*, 1928, p. 89.

² Committees of Elders.

³ *Report of Royal Commission on Agriculture*, 1928, p. 480.

⁴ *India. A Bird's-eye View*, Ronaldshay, p. 140.

⁵ *Moral and Material Progress of India*, 1928-9, p. 315.

⁶ *Report of Royal Commission on Agriculture*, 1928, p. 500.

⁷ *Ibid.*, p. 500.

⁸ *Indian Road Development Committee*, vol. ii, evidence, p. 554.

Ameliorative Agencies.

Of late years rural welfare movements of various kind have been initiated by Government and by semi-official and non-official agencies, although so far their activities are sporadic and limited in scope.

Government Activities.

Agriculture is now a transferred subject, controlled provincially. Government activities may be summed up under the following main headings, (1) the promotion of scientific agriculture by means of Agricultural Colleges (of which there are now eight)¹; (2) irrigation by means of (a) wells, (b) storage tanks, and (c) canals; (3) forest development; (4) the Co-operative Movement.

The Co-operative Movement.

This movement, initiated in 1904, and including in 1926 nearly 90,000 societies,² deals with a large number of the rural problems briefly indicated above. Its main object when formed was to free the cultivator from indebtedness and to provide him with credit for purposes of better cultivation. The Co-operative Credit Societies Act of 1904 provided for the formation of credit societies only. In 1912 under the amended Co-operative Societies Act societies were formed for other purposes, e.g. the 'joint sale of agricultural produce, the production and sale of implements and manures, the furtherance of irrigation projects, and the consolidation of holdings. They open dispensaries and schools; they

¹ *Economic Development of India*, 1929, V. Anstey, p. 168.

² *Report of the Indian Statutory Commission*, 1930, vol. i, p. 276.

assist the Agricultural Departments in spreading knowledge of improved methods of cultivation, and they maintain communications and build new roads.’¹ In Bengal anti-malarial societies, started by Rai Bahadur G. C. Chatterjee, have grown to over 1,000 in number, and have done useful work in village sanitation and in dealing with stagnant pools.² Although the non-credit societies number as yet only 2,298,³ they have made a valuable contribution towards the solution of the complicated problems which hamper agricultural progress. Ten members may form a rural credit society, and women are admitted as well as men. In remote villages the society’s ‘outward and visible sign of existence consists of a bundle of books tied up in a cloth, for the society has no office, nor telephone, nor telegraphic address.’⁴

Women’s Co-operative Societies.

In particular in the Punjab and in Bombay,⁵ women take part in the membership of co-operative societies and are also occasionally on the managing committees or act as officers to these. As many as 129 women’s societies, with a membership in 1927–8 of 1,691⁶ were organized in the Punjab by 2 inspectresses, later assisted by 5 sub-inspectresses. With the exception of a few societies having education as their objective, these women’s societies exist for the encouragement of thrift.

¹ *Moral and Material Progress of India*, 1928–9, p. 348.

² *Royal Commission on Agriculture*, 1928, vol. iv, p. 270.

³ *Indian Year Book*, 1929, p. 438.

⁴ *Report of Royal Commission on Agriculture*, 1928, vol. xiv, p. 344.

⁵ *Economic Development of India*, V. Anstey, 1929, p. 195.

⁶ *Report on the Working of Co-operative Societies in the Punjab*, 1928, p. 8.

Semi-official and non-official Movements for Rural Welfare.

The co-ordination so necessary but too often absent in official departments is even more lacking amongst semi-official and non-official activities. To remedy this defect, a Rural Community Board has recently been initiated in the Punjab. By this machinery activities for rural welfare, official and non-official, are linked up by means of Rural Community Councils in each district. On these councils representatives of the various rural departments,¹ e.g. education, agriculture, and co-operation, meet and exchange views. The Rural Community Board, together with these district councils, has 'greatly stimulated the movement for mass education'² by the provision of village libraries, lectures, and pamphlets.

The opinion is expressed in the abridged report of the Commission on Agriculture 'that the movement will gain in power for good if it develops a women's side to its activities. The establishment of a women's institute in a village would supply a centre for education and co-operative activities as well as for mother and infant welfare work and might remove the present obstacles to the employment of women teachers in village schools.'³

Co-ordination in rural welfare schemes.

Concerted effort is generally recognized as necessary in order to overcome the hydra-headed obstacles to rural improvement. 'What in the west is one problem is in India a bundle of problems, each one having its roots deep in traditional usage and religion.'⁴

¹ *Report of Royal Commission on Agriculture*, 1928, p. 505.

² *Moral and Material progress of India*, 1927-8, p. 369.

³ p. 61.

⁴ *Moral and Material Progress of India*, 1927-8, p. 357.

Dr. Harold Mann, Director of Agriculture in Bombay Presidency, stated in his evidence before the Royal Commission on Agriculture,¹ 'The time has come to look at the rural problem as a whole, and to see whether definite progress cannot be made, not merely in the technical improvement of agriculture, or the organization of village finance, or in pushing village sanitation, or in increasing the number of villages with schools, but in taking all these things as part of one end.' He suggests that a Society of Servants of Rural India be formed in order to inspire and supply workers, and that Government subsidies should assist the movement. Local Development Associations should prepare the way by propaganda in defined areas for intensive work in the villages. In *India, the New Phase*,² Sir Stanley Reed expresses the view that the regeneration of India 'must arise from and depend on Agriculture. Something could probably be effected by the creation of competent Boards for Rural Reconstruction'.

The Gurgaon Experiment.

A comprehensive movement to combat the basic evils of rural India, e.g. poverty, illiteracy, and disease, is the Gurgaon Experiment of Village Uplift organized by Mr. F. L. Brayne, late Deputy Commissioner of the Gurgaon District in the Punjab. In no other scheme has such stress been laid on the position of rural women. In his evidence before the Royal Commission on Agriculture,³ Mr. Brayne states 'If I might pick out the heart and centre of the uplift campaign, I should say that it was the elevation of women'. The Gurgaon scheme 'claims to deal with the whole life and activity of the

¹ Vol. ii, part i, p. 15.

² p. 107.

³ Vol. viii, p. 57.

peasant and his family, and by means of intensive propaganda to demonstrate to him that climate, disease, and pests can be successfully fought, thus leading to a great and rapid improvement in agriculture and in the general standard of life.' ¹

Mr. Brayne came in 1920 to Gurgaon with Mrs. Brayne, who was new to India, but who took an active part in the work. In his own words 'we arrived, after a failed monsoon, in a district labelled, ever since the British first took it over, as "very insecure". Every village we visited presented a more gloomy picture than the last. . . . The people were poor, desperately poor, desperately dirty and unhealthy, with no conscious desire for anything better because they had no idea that anything better was possible.' ²

It took some years of study before the remedies for such conditions were found. The work of reform may be roughly divided into (1) agricultural improvements, and (2) those which affect human welfare directly.

The two divisions of the work are dealt with by the School of Rural Economy and the School of Domestic Economy. Students or village 'guides' are trained at the former school, the course extending to one year.³ Practical work for the students is provided at the farm of the school and they visit villages to carry on uplift propaganda.⁴

Reference to the work at Gurgaon is made in the *Report of the Royal Commission on Agriculture*.⁵ 'The scheme embraces the work of every department of Government

¹ *Economic Development of India*, 1929, V. Anstey, p. 183.

² *The Gurgaon Experiment*, p. 3. Report of an address by Mr. F. L. Brayne to the East India Association, London, 10 December 1928.

³ *Remaking of Village India*, F. L. Brayne, 1929, p. 197.

⁴ *Ibid.*

⁵ p. 502.

engaged in rural areas; it seeks to assist in securing the adoption of the advice of the expert by a well-planned propaganda campaign. . . . Lecture, song, drama, magic lantern, cinema, and even the loud-speaker are made to contribute. . . . Side by side with the propaganda campaign, there are provided facilities for those who wish to try the advice so tendered. Good seed, selected bulls, ploughs, well-gear, quinine, inoculation, and so on are readily available. Co-operative Societies, adult schools, domestic economy classes and every other means calculated to assist the spirit of service and self-help are at hand. Everything useful is brought within easy reach of those who need it.' The usefulness of the 'guide' lies, as his name suggests, in directing the villagers to the right quarter for help and advice.¹

The School of Domestic Economy was started in 1926, 'its object being to train village girls, any age from 16 to 35 years, to teach in co-educational schools all over the district. There are about 150 of such schools, the number increasing yearly. These girls are admitted on condition that after their training, which lasts for a period varying from one to two years, they will teach in one of these schools. . . .'² Much stress is laid on the health side of the work. Trained health workers teach in the mixed schools, health visitors supervise confinements and train the hereditary dais.³ A Lady Superintendent, Miss E. M. Wilson, was appointed in 1927 to supervise and co-ordinate all the activities for the welfare of women and children.

¹ In *Rusticus Loquitor*, p. 127, Mr. M. L. Darling points out that there is room for improvement in the methods of selection, training, and supervision of the guides.

² *The Remaking of Village India*, F. L. Brayne, 1929, p. 201.

³ *Ibid.*, pp. 90 and 92.

The elevation of women aimed at may be summed up in Mr. Brayne's words. The drudgery of the corn-mill and the dung-cake 'must go, and go for ever. The field work must remain, as it spells fresh air and healthy exercise for both mother and children. . . . The pith and centre of the problem of village remaking is the education and training of the girls.'

The extension of general uplift work depends upon (1) personal leadership and (2) financial support. The Gurgaon scheme has been criticized as being too dependent upon individual driving power, too costly, and having as yet insecure finances.

These objections may be considered inevitable at this early stage, and the suggestion has been made that an agency such as the Rural Community Council might ensure greater continuity than reliance upon the surplus energies of an official who has to administer an area greater than that of an average English county.¹ A Village Welfare Association has been proposed by Mr. Brayne,² combining official and voluntary workers in order to ensure financial support for the initiation of such schemes as the Carnegie Trust which has helped rural community councils in England.

Village Uplift Work on practically the same lines as that of Gurgaon has been introduced in the United Provinces in recent years, where 'there is a great field for voluntary agencies—to augment the number of workers.'³

In Madras Presidency, at a Rural Reconstruction Conference held at Thanthonimalai Karur under the

¹ The 250 Districts of India average in size 4,430 sq. miles, or three-quarters of the size of Yorkshire. *India, Stepmother*, C. Hill, p. 20.

² *Times Educational Supplement*, 15 December 1928, p. 549.

³ Director of Public Health, United Provinces, answer to questionnaire.

presidentship of the Zamindar of Minnampally in 1929, similar methods, including the training of village guides, were urged.¹ In Madras the Social Service League tackled in a village of outcastes 'the three crying evils of . . . dirt, debt, and drink' with remarkable results in a period of three years.² In Bombay Presidency also, village welfare work has been initiated by Mr. Amratlal Thakkar, of the Servants of India Society, amongst the Bhils in the Panch Mahal district.

Concerted remedies are urged by Mr. K. T. Paul:³ 'Possibly the most important discovery of the social worker is, that if the Indian villager is to be helped at all it can be done only . . . by a comprehensive service directed toward his every need'; that such lines of service should be 'undertaken simultaneously . . . by non-official agencies . . . financially and morally encouraged and supported by the local self-governing bodies'. All this to result in education 'which primarily enables the Indian village to reconstruct its corporate life'.

Reference to the work of the Servants of India Society and the Poona Seva Sadan is made in the *Report of the Royal Commission on Agriculture*,⁴ which states that its activities have 'a bearing on the problems of rural environment' by their provision of trained workers for social service, in particular of medical education amongst women.

The Rural Reconstruction work of the Indian Y.M.C.A. is also described. The Commission visited

¹ *Stri Dharma*, November 1929, p. 559.

² *Indian Problems*, Bishop Whitehead, 1924, p. 159.

³ *The British Connection with India*, K. T. Paul, 1927, pp. 172-3.

⁴ p. 489.

one of the six centres established by this organization in southern India. 'The main object of these centres is to bring to notice by means of exhibits and markets, the distribution of literature, and dramatic performances, the facilities which co-operation, education, and sanitation offer for a better and fuller life. This Association has recently founded a Students' Association for Rural Service.'¹

Women's Institutes.

The Women's Institute Movement, though spreading in several provinces, has only begun to reach the villages, and is mostly concentrated in small rural towns.

In Bengal the late Mrs. G. S. Dutt devoted herself to the awakening of women, in particular those in purdah. In an article² she stated 'A nation can never rise if its women remain ignorant . . . One half of India is stricken with paralysis.' She set herself to the establishment of Mahila Samitis or Women's Institutes in rural districts. The first organization of the kind was founded at Pabna in 1913, and in 1929 over 250 such societies, with varying degrees of activity, were at work in Bengal, having a central organization in Calcutta, from which lecturers, literature, general help, and information are supplied to the federated societies.

Similar organizations initiated by Lady Bose are also at work in Bengal, the objects of which are to impart education (mainly through the vernacular) to girls and women in order to make them good and helpful wives and members of society.³ Their activities include the

¹ *Report of Royal Commission on Agriculture*, p. 490.

² *A Woman of India*, G. S. Dutt, 1929, p. 90.

³ Ninth Annual Report (1927-8) of the Nari Shiksha Samiti.

establishment of schools and training of teachers, the formation of mothers' classes for child-rearing, the preparation of books in the vernacular and the establishment of libraries, and the development of home industries.¹

In the Gujrat District of the Punjab, a Women's Technical Institute with 40 students has grown out of Purdah Club meetings, the Purdah Club continuing to assemble at the Institute once a week.² This and other Institutes and several Welfare Centres are formed under the Red Cross Society, from which they receive help, but they are as far as possible self-supporting. Mrs. Cuthbert King, President of the Gujrat Red Cross, writes in reference to these Institutes, 'A capable health visitor is the most valuable person in medical, educational, and social advancement amongst women. Her centre forms a nucleus for all practical work ; where it is possible to have a technical expert as well, a Women's Institute can be run with very little extra expense.'³

A questionnaire has been widely circulated to experts in India by the Women of India Survey Committee on the following points:

- (1) Methods of rural welfare work (a) with resident women workers with all-round knowledge of elementary education, domestic subjects, and nursing, midwifery, &c., or (b) with highly specialized workers from different departments working over a wide radius from a common centre.
- (2) Protection and supervision of women workers in villages.

¹ *Ninth Annual Report (1927-8) of the Nari Shiksha Samiti.*

² *Annual Report of the Red Cross Society, Gujrat Centre, 1928, p. 4.*

³ Answer to questionnaire.

(3) Methods of financing rural welfare work.

(4) Methods of propaganda by cinema or broadcasting.

The majority of those replying to (1) have preferred (a), some of the reasons given being that 'village people must know the person well and have confidence', and on the ground of economy, 'the country is not rich enough to afford experts'.¹

But a compromise or combination of the two methods is suggested by the Central Social Service League, Delhi, the Delhi Provincial Council of Women, and by several correspondents associated with the Parliamentary Sub-Committee of the Bombay Presidency Council of Women, who write: 'Dr. Balfour's opinion was accepted by the Committee. A combination of both the proposals is necessary, but there should be a resident worker in each village only a little better than the village women themselves, but trained in the above subjects, and there should be a more highly specialized worker who would travel over a large area visiting these workers and keeping their knowledge up to the proper standard.'

As regards point (2) in the questionnaire, several methods of ensuring security to women workers in villages are suggested by correspondents. These methods include the training of resident women, e. g. the wife of the village teacher; the chaperonage of workers from other parts by elderly relatives or friends; the grouping of workers together; 'Welfare Units' as in the Punjab; provision of hostels in the larger centres; supervision by (a) local bodies such as the panchayat, (b) by societies such as the Red Cross or the Seva Sadan, (c) by the central authority.

¹ Dr. Commissariat, Superintendent of Medical Aid to Women, United Provinces. Answer to questionnaire.

The provision of a house is sometimes a necessity. The Parliamentary sub-Committee of the Bombay Presidency Council of Women writes: 'there are no suitable houses for these young women in the villages. They cannot live alone unprotected in a small house by themselves. Villagers in bigger houses or wards refuse to let a room to a stranger, especially a woman. So that unless her people know some one in the village it is very difficult for her to get a suitable room to live in. Sometimes the people who are willing to let a room to a teacher are not respectable, and then the unprotected girl is far from safe. . . . Very often she is asked to help in the homes of the village head-men, and it is very hard for her to refuse, knowing that the men have to do a great deal with the management of the school; but if she once consents to go to their homes she is bound to lose her good name, and if she refuses she becomes unpopular and is troubled in various ways.'¹

Dealing with (3) finance; from the answers of correspondents it is evident that difficulties bristle, both as regards taxation for this purpose and the collection of voluntary funds. In the initial stages of such work voluntary funds are considered by some to be the best material to build upon.

In reference to (4) methods of propaganda, there seems to be general agreement that the cinema is an admirable means of promoting welfare measures, but the number of educative films is lamentably small.

Conclusions.

To sum up the main points which emerge from this brief and inadequate survey of rural questions in India.

¹ Answer to questionnaire.

It is clear that many movements, official and unofficial, are at work. They are alike in their recognition of the need of simultaneous attack upon interrelated problems, and (in most cases) in their insistence upon the elevation of women as a basic factor in the improvement of conditions, but so far they are isolated and independent efforts.

Lack of co-ordination is the great weakness of these many movements, official and non-official. The time has come when an organized scheme is essential. In the *Report of the Royal Commission on Agriculture*, Rural Community Councils representing official departments and non-official activities are advocated as 'exactly the kind of bodies to be entrusted with the type of work which is being done in the Gurgaon district' and it is urged that they should be 'a link between the village and head-quarters.'¹

The Commissioners also emphasize the supreme importance of a women's side to the movement. Adult education for women by means of Schools of Domestic Economy as at Gurgaon, Women's Institutes, or with the aid of the Co-operative Movement, is the most effective short cut to general welfare and progress of the village. One recommendation of the Commission on Agriculture is that a demonstration should be provided of 'the true relation between female literacy and general literacy' by means of comparative records of families (otherwise in similar circumstances) in cases where the mother is literate and where she is illiterate.

India, we are repeatedly informed, is a land of villages. So far the rural scene has been practically untouched by the new movement for the advancement of women.

¹ *Report of Royal Commission on Agriculture*, 1928, p. 506.

The release of rural women from a life of squalor and drudgery and their education both as mothers and as useful and respected members of the village community is the task which lies before Indian women. A supreme effort also is needed to evolve a co-ordinated organization on an adequate scale, which will link up the various non-official movements and the departments of Government activity, bringing their benefits to the service of the humblest rural worker and effecting a transformation of village life.

VI

WOMEN IN INDUSTRY

By E. MARTELLI, B.A.

Industrial India.

URBAN India has been described as consisting of a few intense, concentrated 'islands of industrialism set in the ocean of an all-pervading agriculture'.¹

About 12.9 per cent. of the people live in towns, the rest are engaged chiefly in pastoral pursuits. Eighteen million persons were classified by the 1921 Census Report as being engaged in industry, but only the 1 $\frac{3}{4}$ million² who work in factories and mines where the conditions of employment are regulated by law may be considered as belonging to organized labour. India's industrial population is thus about $\frac{1}{2}$ per cent. of the whole and about one-sixth of this number are women. A minute proportion, and the women's part in it still more minute, yet at the International Labour Office at Geneva India ranks as one of the eight great industrial countries of the world, and in the process of her industrial revolution are emerging labour problems of considerable complexity which are even now being investigated by a Royal Commission under the chairmanship of Mr. J. H. Whitley.

¹ *India, the New Phase*, Stanley Reed and P. R. Cadell, 1928, p. 112.

² For the exact figures vide the Annual Reports of the Chief Inspector of Mines and on the working of the Indian Factories Act. The numbers are increased if the tea gardens are included. Most of the labour in tea gardens is outdoor labour but working under organized conditions.

Distribution of Industries.

Industrial and commercial India is concentrated in the great ports and railway junctions or, in the case of the plantation and mining industries, the districts where certain raw materials are found, leaving vast areas unaffected by machine or factory. The chief large-scale industries are the textile, mining, and plantation industries, and in textiles by far the most important branches are cotton and jute. Of the 252,933 women employed in factories 58,506 work in cotton mills and 55,040 in jute mills;¹ in addition, cotton-ginning² gives employment to large numbers. Both industries are concentrated. Bengal has a world monopoly of raw jute, the jute mills being situated in an area round about Calcutta and the Hooghly delta. Cotton is grown almost all over India, but the Bombay Presidency contains 70 per cent. of the cotton mills in the country, employing 45,592 women; more than half are in the intensely crowded city of Bombay itself, but Ahmedabad and Sholapur also contain mills. Outside the Bombay Presidency the industry is carried on in many centres, notably Nagpur, Madras, and Cawnpore.³

In 1928 78,081 women were employed in Indian mines, 31,785 of them underground.⁴ Mining is carried on in many parts of India, but the collieries employ the largest number of workers. The coal mines are situated

¹ *Statistics of factories subject to the Indian Factories Act, 1928.*

² Ginning is the process of separating the cotton seed from the lint. It is a seasonal employment carried on chiefly in factories located in small towns in the cotton-growing districts; cf. J. H. Kelman, *Labour in India*, 1923, p. 61 et seq.

³ *The Economic Development of India*, V. Anstey, 1929, p. 36.

⁴ *Report of the Chief Inspector of Mines, 1928.* 28,408 women were employed in collieries underground in 1928.

in an area which includes parts of Bengal and of Bihar, and the iron and steel and engineering industries have become largely localized round the coalfields. The position of women in mines will not be considered in this chapter, because the special problems connected with their employment underground will shortly disappear owing to a series of regulations, passed by the Government of India in 1928, which will exclude women from underground work in the chief coalfields and the Punjab salt mines by a gradual process to be completed by July 1939. The prohibition came into force in all other mines in July 1929.¹

Tea-planting is the only large industry which employs men and women in anything approaching equal numbers.² The tea gardens support a total labour force of 907,000 men, women, and children, of whom 75,000 are temporarily employed.³ A quarter of a million women are engaged in this work in Assam, where most of the gardens are situated.⁴ A large number of women are also employed in the gardens of northern Bengal, as well as nearly 13,000 in the tea, coffee, and rubber plantations of southern India.

The remainder of the female labour force in India is made up of women who work in rice mills, in silk and wool mills, in pottery work, and in many small industries. In southern India a large and growing number are employed in coir rope, cashew, and ground nut factories.⁵

¹ *Report of the Chief Inspector of Mines*, 1928.

² In textiles the percentage of women to the total number employed varies from about 15·8 in Bengal to 20 per cent. in Bombay. *Bombay*, 1927-8, published by the Bombay Government Central Press, 1929.

³ *Times Trade Supplement*, 1 February 1930, quoting the *Indian Trade Journal*.

⁴ *Census of India Report*, 1921.

⁵ *Note on the Working of the Indian Factories Act*, 1927.

Women also sweep, clean, sort waste, do coolie work and odd jobs in many other factories and mines.¹

Characteristics of Indian Industrial Workers.

The chief characteristic of Indian labour is that it seldom becomes entirely divorced from agriculture. Here and there, it is true, the germs of an industrial class² are appearing, 'but this movement is only in its infancy. Indian men and women on the whole enter industry only for short periods and not as though they had embarked on a permanent profession.'³ 'The hearts of the vast majority are in the villages to which they return at intervals more or less frequent.'⁴ So frequent, in fact, that in an exceptionally well-managed mill 'the manager calculated that his entire factory staff changed once every 18 months'.⁵

Disparity between the Sexes in Industrial Towns.

Since a large proportion of their population is composed of temporary emigrants from other provinces there is in most industrial towns in India a marked disparity in numbers between men and women. Both in Bombay and in Calcutta nearly 70 per cent. of the population are men.⁶ 'The standards of certain communities are such that the men do not feel disgraced by working in the

¹ 'Women in Indian Industry', M. C. Matheson, *India*, October 1929.

² 'Notably in Cawnpore, where a settled mill population is growing up', J. H. Kelman, *Labour in India*, p. 90.

³ *Labour in Indian Industries*, G. M. Broughton, 1924, p. 14.

⁴ *Moral and Material Progress of India*, 1927-8, p. 133.

⁵ *Labour in Indian Industries*, G. M. Broughton, p. 18. The instability of Indian labour accounts for much of its alleged inefficiency and for the difficulty of organizing trade unions.

⁶ *Labour in Indian Industries*, G. M. Broughton (quoting from the Census Reports), pp. 83 and 129.

mills themselves but would yet never dream of taking their wives into such surroundings.’¹ ‘If a man wishes to take his wife and children with him he will probably seek work in a tea or coffee garden where all the family will be able to get employment.’²

Characteristics of Female Labour.

The women who find employment in industry are ‘normally only the poorest and most ignorant’—most ‘are married, many of them are mothers and there is no striking preponderance of young women.’³ Of the women who go to the mills it is taken for granted that they ‘do not enter them either singly or in groups of women only.’⁴ They come with their husbands or uncles or fathers. In these little family bands odd women are found. There may be a widow or an unmarried sister of husband or wife, or there may be a young neighbour who had been married as a child, whose husband, before she joined him, had taken a fancy to another woman . . . besides these women there are the large number of girls who begin work as half timers.’⁵

Effects of Industry on Family Life.

When the worker gets to the city he will find it extremely difficult to continue the family life that he has known in the villages, for even if his wife and son obtain

¹ *Labour in India*, J. H. Kelman, 1923, p. 208.

² *Labour in Indian Industries*, G. M. Broughton, 1924, p. 16.

³ *Economic Development of India*, V. Anstey, 1929, p. 122.

⁴ There are exceptions. In Cawnpore a missionary society was requested to provide a hostel for the girls working in a leather factory. *Labour in India*, J. H. Kelman, p. 151.

⁵ *Labour in India*, J. H. Kelman, pp. 207–8. In 1928 there were 7,915 half-time girls employed in factories in India.

employment with him their work will be in different departments at different times. 'The excessive overcrowding which, generally speaking, factory workers have to endure has an even more deleterious effect on family life, for in India family life is most zealously guarded and seclusion and privacy are sought after by all. Town life cannot but have a very disintegrating effect on it, for when a man does bring his family with him they have almost invariably to live crowded up with other families and all hope of privacy disappears.'¹

The importance attached to family life has a particular bearing on women workers. 'A woman cannot work and live alone in India . . . and so if a woman worker is left a widow or if the man she is attached to leaves the mill, she must find another with whom to live and share her earnings.'² These irregular unions are especially common in Bengal.³

Factory Law.

Arrived at the factory the immigrants will find standardized conditions of work such as are unknown in the village. By the Indian Factories Act passed in 1922 no children under the age of 12 may be employed in factories.⁴ Children between the ages of 12 and 15 may be employed for 6 hours a day on production of an age certificate, but if they are employed for 5½ hours or more they must be given a rest interval after 4 hours' work.

¹ *Labour in Indian Industries*, G. M. Broughton, 1924, p. 108.

² *From Field to Factory*, M. Read, 1927, pp. 63-4.

³ Cf. *Women's Labour in Bengal Industries*, Dr. D. F. Curjel, *Bulletins of Indian Industries and Labour*, No. 31.

⁴ The law applies to power-using factories employing 20 and more persons and may be extended by local governments to factories where 10 people are employed. No child under 13 may be employed in a mine.

The working day for adults is limited to 11 hours and the week to 60 hours. A rest-interval of 1 hour after 6 hours' work is compulsory and there must ordinarily be one holiday a week. Night work for women and half-timers¹ is illegal and no woman or half-timer may work at any operation involving the use of lead compounds.

Inspection.

The actual practice as far as women and children are concerned does not always conform to the law, for there are not enough factory inspectors to secure its strict enforcement. In 1928 10 per cent. of the factories were not inspected at all, and many others only once.² Contraventions are particularly easy in the ginning industry, since the gins are situated often in isolated districts where news of his visit travels considerably faster than the inspector himself.³ At present there is only one woman factory inspector in all India,⁴ and thus 'many of the needs of the women do not come to the knowledge of the men inspectors, because in India women are extremely reluctant to discuss such matters with men'.⁵

Hours of Work.

In other respects the standard in many factories is higher than the legal minimum. The working week of industrial women is often less than 60 hours. In 1928

¹ i. e. children of 12-15.

² *Note on the Working of the Indian Factories Act*, 1928.

³ *Labour in India*, J. H. Kelman, 1923, pp. 67-8. Miss Kelman states that the conditions of work in the ginning industry are often very unsatisfactory. Both women and children are exploited.

⁴ Appointed by the Bombay Government in 1924.

⁵ *India and the International Labour Organization*. L.N.U. pamphlet No. 235, p. 46.

women were working 48 hours a week or less in 30 per cent. of the factories, from 48 to 54 hours in 14 per cent., and more than 54 hours in 56 per cent.¹

Wages.

It is difficult to present a true picture of wages throughout India, for up-to-date official statistics are lacking² and standard wages non-existent. Both wages and cost of living vary from district to district and, in the case of the former, from factory to factory.³ In addition the pay is often supplemented by allowances in kind, especially in the tea gardens, where quarters and a plot of land are usually given.⁴

Estimates published by the Bombay Labour Office⁵ show that the average monthly earnings of women in Bombay cotton mills are Rs. 16. 11. 6, paid usually on a piecework basis, while the average family income of such workers is Rs. 54. 4. 6 a month. Dr. Curjel states that in Bengal the average woman jute worker receives a weekly wage of Rs. 2. 8. 0, and women in cotton mills rather less.⁶ In the tea gardens a woman's wage varies from Rs. 4 to Rs. 9 a month and forms part of a family income, since her husband and family will probably be employed on the same estate.⁷

¹ Dr. Curjel, who in 1921-2 investigated the conditions of women's work in Bengal, found cases of women working 12 hours a day. Vide *Women's Labour in Bengal Industries*, by Dr. D. F. Curjel.

² *The Economic Development of India*, V. Anstey, p. 461 et seq.

³ *Labour in India*, J. H. Kelman, p. 117.

⁴ *Report on Labour Conditions in India*, J. Hallsworth and A. Purcell, 1928, p. 35.

⁵ *Report of an Inquiry into the Wages and Hours of Labour in the Cotton Mill Industry*, 1925.

⁶ *Women's Labour in Bengal Industries*, Dr. D. F. Curjel.

⁷ Ibid. Vide also *Report on Labour Conditions in India*, J. Hallsworth and A. Purcell.

'Low as are the average wages of the Indian industrial worker, they would yet be sufficient to give him a better standard of living if the receipt of them in their entirety could be guaranteed him.'¹ As things are part goes in commission to overseers and clerks,² part in fines exacted by the management.³ Moreover, owing to the universal custom by which managers defer the payment of wages in order to keep some hold over their unstable labour forces, the money-lender gets a large share.⁴ But the factor which does most to lower the amount of wage received is the bad timekeeping in Indian factories and mines. Much of the absenteeism is caused by those who go into industry temporarily in order to supplement their agricultural earnings, and leave it when they have earned enough to tide over a bad period,⁵ but much also is due to 'the physical breakdown of the labourer which unfits him for further mill work'.⁶ In 1907 the manager of the Empress Mills, Nagpur—a firm noted for the welfare work which it has instituted for its employees, and for good conditions of work generally—kept a record of the attendance of his employees in two selected months. Only 21 per cent. of the women

¹ *Moral and Material Progress of India*, 1927-8, p. 133.

² For a discussion of the universality of unacknowledged commission in India, vide *Labour in India*, J. H. Kelman, pp. 106-7.

³ *Industrial Welfare in India*, by P. S. Lokanathan, 1929, chapter viii. Mr. Lokanathan states that fines often amount to from $\frac{1}{3}$ to $\frac{1}{2}$ of wages.

⁴ In Bombay a worker will get no wages for 6 weeks after entering the factory. Meanwhile he has to borrow at a high rate of interest; cf. G. M. Broughton, *Labour in Indian Industries*, p. 124.

⁵ 'The object of miners in the Raniganj coalfields 'is to earn enough during a few days to enable them to enjoy the rest of the week'. They often return home for 3 or 4 months at harvest time. Vide *Economic Development of India*, Anstey, p. 123.

⁶ Evidence of Dr. Nair before the Indian Factory Labour Commission. Report 1908, p. 89.

attended regularly and about 15 per cent. were absent for more than half the month.¹

Conditions of Work.

This evidence of the strain felt by women workers in mills is borne out by other authorities. The Age of Consent Committee states that 'in the millhands the infant mortality is due to the conditions obtaining in the mills and the consequent strain involved on the females. Better regulations regarding work and sanitation are suggested to reduce the mortality.'²

Although women are sharing in the gradual improvement of health and sanitary conditions which the more enlightened employers are bringing about, 'it is not generally recognized by the managements employing industrial women workers that the peculiar conditions of life among Indian women necessitate special provisions for their welfare.'³ Many of the large factories now have dispensaries, but the smaller factories make no provision for medical relief. 'Even in the large factories only in exceptional instances are separate arrangements made for the medical treatment of women and in very few factories have they the benefit of being treated by one of their own sex.'⁴ This in effect bars women from any benefit, since few Indian women will consent to be treated by a man. Dr. Curjel says of Bengal women workers that 'advice was practically

¹ The *Bombay Labour Gazette* states that normally 15 to 20 per cent. of those on the wages-book are away from work. *Labour and Housing in Bombay*, A. R. Burnett-Hurst, p. 59.

² *Report of the Age of Consent Committee*, p. 38.

³ *Women's Labour in Bengal Industries*, Dr. D. F. Curjel. This remark was made of Bengal. Some employers do provide amenities for their women workers, but this appears to be still exceptional; see below, p. 173.

⁴ *Labour in Indian Industries*, G. M. Broughton, p. 20.

never sought for gynaecological complaints, or in a midwifery case, and but rarely for their babies in the diseases of infancy.’¹ Not only are women workers ‘practically shut off from medical benefit’, but since there are no arrangements in case of sickness they depend when ill on the charity of relatives and neighbours.² The inadequacy of this is shown by the fact that among Bengal mill workers ‘the length of absence at childbirth varied from 4 days to 2 days.’³

Housing.

In considering the conditions of life outside the factory one is reminded of the worst period of our own Industrial Revolution. Just as in England in the nineteenth century, ‘the slums are generally neglected by the municipalities . . . the housing problem has been yet nowhere in India seriously tackled.’⁴ The most lurid manifestations of overcrowding and bad sanitation are found in Bombay, where the problems are intensified by shortage of land.⁵ According to the 1921 Census the average density of the city is 78·05 persons per acre; ⁶ in the industrial area the rate is from 400 to 500 per acre and in some parts it rises to over 700. Sixty-six per cent.

¹ *Women's Labour in Bengal Industries*, p. 18.

² *Ibid.*, p. 20.

³ *Ibid* p. 21. ‘That the shortness of absence is probably due to economic causes is borne out by the fact that women in mines and tea gardens often take 2 or 3 months’ absence for childbirth; cf. Dr. Curjel, pp. 28 and 34. Mr. Burnett-Hurst states that in Bombay the leave taken by women workers before delivery varies from 1 day to 2 months.

⁴ Mr. P. Kanekar, of the Social Service League of Bombay, writing in the *National Christian Council Review*.

⁵ Mr. Kanekar says that Ahmedabad, Nagpur, and other cities are no better than Bombay in respect of drainage, &c.

⁶ The Census Report of 1911 gave the number of persons per sq. mile in the following towns: Bombay 42,585, Calcutta with suburbs 24,841, Howrah 20,885, Cawnpore and Cantonment 18,260.

of the population live in one-room tenements with an average number of 4 persons in each. Many of these rooms are occupied by 2 families, while in 135 instances one room houses 6 or more families.¹ One such 'home' is described by Dr. Barnes: 'In one room . . . measuring some 15 ft. by 12 ft. I found 6 families living. Six separate ovens on the floor proved this statement. On inquiry I ascertained that the actual number of adults and children living in this room was 30. Three out of 6 of the women who lived in this room were shortly expecting to be delivered. I was shown a small space some 3 ft. by 4 ft. which was usually screened off for the purpose. In the rooms in the basement of the house conditions were far worse. Here daylight with difficulty penetrated, sunlight never.'² Such rooms often look on to inside passages which serve as the only ventilation and are so dark that artificial light is always needed.³

Appalling sanitary conditions intensify the evil effect of this congestion. 'Many chawls⁴ were found where sanitation seemed to be extinct and unknown. All gutters inside and outside were choked up, all the water-closets had become so foul that the tenants ceased to make use of them for months together. There were two washing places in working order for the use of about 500 people and these two were always full of dirty water 2ft. deep.'⁵

The heaviest burden of such conditions falls on the woman. Her 9 hours or so at the mill are only a part

¹ *Census of India Report*, 1921, Bombay, vol. ix, part ii, p. iv.

² Maternity Benefits for Industrial Workers, *Bombay Labour Gazette*, September 1922.

³ *From Field to Factory*, M. Read, p. 53. Cf. also Report of the Municipal Commissioner for the City of Bombay 1920-1, p. 40.

⁴ Chawls are the Bombay working-class tenements.

⁵ *Slumland in Bombay*, published by the Social Service League of Bombay, 1922.

of her working day. The rest is spent in domestic duties performed in the conditions described above.¹ Moreover, while most of the men sleep out of doors she 'huddles down to sleep in the dark, unventilated room along with women lodgers and relations and their children and her own'.² It is not surprising to learn that the mortality rate among infants born in these one-room tenements was 86 per cent. in 1920.³ Nor are disease and a high infant mortality rate the only results of this way of living. Many authorities speak of 'the fate of the women workers to whom the close, overcrowded tenements prove a gateway to a life of open prostitution.'⁴

Bengal may be considered as another representative housing area. Here mill labour suffers not so much from overcrowding as from bad and unsuitable housing. The mills are situated in a semi-rural area round Calcutta and about one-third of the jute workers live in quarters provided by the mill managers in the hope that thereby imported labour may be persuaded to settle down.⁵ 'Some mills are continuing to erect lines of a bad and insanitary type, rooms being placed in a line back to back and with no proper arrangement for ventilation.'⁶ The habits of the workers lead to overcrowding even here where plenty of land is available—'The average number supposed to occupy a one-roomed

¹ 'The working-class woman in cities certainly works at least 16 hours a day if not more'. T. Tilak in *Women in Modern India*, p. 152, 1929.

² *Labour in India*, J. H. Kelman, p. 145.

³ *Report of the Municipal Commissioner for the City of Bombay*, 1920-1.

⁴ *Labour in India*, J. H. Kelman, p. 207.

⁵ *Labour in Indian Industries*, G. M. Broughton, p. 138.

⁶ *Women's Labour in Bengal Industries*, Dr. D. F. Curjel, 1923. Dr. Curjel says that 'Mill quarters, if built outside the factory yard, do not for purpose of construction come under the provisions of any supervising sanitary authority'.

house was 4 adults, but managers said they had on occasion found as many as 11-16 persons occupying one room.¹ Evidence is often given that the dreary monotonous lines of houses built with no thought for the social customs and needs of those who are to occupy them are responsible for the irregular family life alleged to be characteristic of Bengal mill labour. 'The determining factor would appear to be that mill managements do not usually make provision for the housing of ineffective labour, and the want of privacy in many of the mill quarters provided is such that respectable women even of low caste could not live there.² . . . Where there was evidence of a real family life among the workers usually the house was situated outside the mill in a bazaar or basti.³ Such houses were of the Bengali type. . . . Women living in such homes obtain the necessary amount of privacy. The surroundings were often insanitary and the rent charged was higher than in mill lines.'⁴

Housing Experiments.

It is a relief to hear that efforts to improve the housing in industrial towns are being made both by public bodies and by some employers. 'The chawls built by the Improvement Trust of Bombay are generally a great improvement on others built before the trust came into operation.'⁵ In the Tata Iron and Steel Works at

¹ *Women's Labour in Bengal Industries*, Dr. Curjel, 1923, p. 15.

² Cf. *From Field to Factory*, M. Read, pp. 56-7, and also *Labour in India*, J. H. Kelman, p. 207.

³ Collection of huts built in the neighbourhood of the mills, owned sometimes by overseers.

⁴ *Women's Labour in Bengal Industries*, p. 16.

⁵ *Labour in Indian Industries*, G. M. Broughton, p. 120. 'The death-rate in Trust chawls is from one-third to one-quarter of that of the whole

Jamshedpur housing accommodation and a plot of land are given to each employee in order to induce him to send for his wife and children and settle down permanently on the spot,¹ and much attention is paid to the general comfort of the work-people.² But the best examples of what might be done for the housing of workers are the two mill villages belonging to the British Indian Corporation at Cawnpore. 'Trees have been planted down the main lines of the village, an open space for a playground is kept, and a school for children and a dispensary set up. Most of the houses have a small courtyard at the back where the women can be entirely private and go about their household duties undisturbed. These two villages are in charge of a welfare worker and his wife, who are father and mother of the village, collect the rents, keep the village committee or panchayat going, watch the school and dispensary, and take what chances there are of educational work among the adults. . . . Here is industry which is attempting to take note of the basic habits of life of the factory workers.'³ A similar housing scheme for the employes in Government factories for the printing of stamps and currency notes has been established by Government at Nasik Road, Bombay Presidency.⁴

city.' *Labour and Housing in Bombay*, A. R. Burnett-Hurst. Reference to recent improvements in housing is made in the 1928 *Note on the Working of the Indian Factories Act*. The improvements do not, apparently, extend to the seasonal factories.

¹ *The Economic Development of India*, V. Anstey, p. 119.

² *Moral and Material Progress of India*, 1927-8, p. 137.

³ *From Field to Factory*, M. Read, p. 59. Lectures on health with lantern slides are given, and midwives provided, in the villages. The Buckingham and Carnatic Mills at Madras have built a village on the same lines; vide *Industrial Welfare in India* by P. S. Lokanathan, p. 145.

⁴ *Moral and Material Progress of India*, 1928-9, p. 120.

Effects of the Industrial Environment on Women.

The foregoing picture of the environment in which most industrial women in India have to live explains the conclusion that 'it is not the actual conditions of work so much as the conditions of life of women and children engaged in organized industries that are extraordinarily unhealthy and socially undesirable. Overcrowding and lack of sanitation have more disastrous results on women and children than on men because a large number of the women are at the child-bearing age.'¹ 'The conditions of women's work and living are partly responsible for the very high rate of infant mortality.'² They account too for the presence of large numbers of babies in the mills;³ for when the mother and older children are working there is no one to look after them at home. 'The alternative to bringing them into the mills, where all day long they breathe fluff and dust, and if they can walk or crawl are with difficulty kept away from the machinery, is to leave them in the huts doped, so that they will remain quiet. . . . Special sized "baby opium pills" are made'⁴ for the purpose. 'It has been calculated that 98 per cent. of the children of industrial workers are thus dosed.'⁵

Legislation.

Organizations such as the All India Welfare Conference, the Child Welfare League, and the All India Social Service League show that India is aware of the foregoing

¹ *The Economic Development of India*, V. Anstey, p. 122.

² T. Tilak in *Women in Modern India*, E. Gedge and M. Choksi, p. 152.

³ Many of whom, says Dr. Curjel, 'showed signs of malnutrition and were in a dirty state'.

⁴ *From Field to Factory*, M. Read, p. 45.

⁵ *The Economic Development of India*, V. Anstey, p. 90.

problems. The condition of her industrial workers has been greatly improved by the extensive labour legislation of the last few years¹ which has been inspired largely by men such as Sir Atul Chatterjee, the present High Commissioner for India, and Mr. N. M. Joshi, the Indian workers' representative at the Washington Labour Conference in 1919. In 1924 Mr. Joshi introduced a Maternity Benefit Bill in the Legislative Assembly, but the Government of India refused to make it law on the grounds of lack of public opinion in favour, impossibility of supervision, ease of evasion owing to the immigratory character of Indian labour, and the inadequate supply of women doctors.²

Welfare Work.

'The development of welfare work has been carried to its farthest point in the case of individual firms with whom care for the health and happiness of their employees is almost traditional. The work done by these firms, while invaluable in itself, as setting an example to other firms, cannot be considered as typical of India as a whole.'³ The main directions which welfare work has taken, and the principal firms responsible for its institution are: education and housing (British India Corporation, Cawnpore; Buckingham and Carnatic Mills, Madras; and Tata Iron and Steel Works, Jamshedpur); medical relief (Tata Mills, Bombay; and Empress Mills,

¹ Vide *Industrial Welfare in India*, by P. S. Lokanathan, chapters ix and x, &c. Vide also *India and the International Labour Organization*, L.N.U. pamphlet No. 235.

² Cf. *India and the International Labour Organization*; cf. also *Stri Dharma*, September 1929. The subsequent inquiry showed that quite a number of firms already had maternity benefit schemes. Cf. *Bulletins of Indian Industries and Labour*, No. 32.

³ *Industrial Welfare in India*, by P. S. Lokanathan, p. 153.

Nagpur—both of which have instituted a maternity benefit and child welfare scheme under a woman doctor; Calico and Jubilee Mills, Ahmedabad; and Currimbhoy Ebrahim Mills, Bombay); and the provision of social and co-operative facilities which are provided in varying degrees by the above-mentioned firms. The work is assisted by social agencies such as the Bombay Social Service League, of which Mr. N. M. Joshi is secretary, the Y.M.C.A., the Seva Sadan in Bombay and Poona, and various women's organizations and missionary societies.¹

Trade Unionism.

Trade Unions are undoubtedly growing,² but in general 'labour is as yet not educated up to the point of appreciating legislation',³ or of co-operating for self help. Trade Unionism is at its strongest in Ahmedabad, where the proportion of emigrant labour is small. The guiding spirit has been a woman—Mrs. Anusuya Sarabhai,⁴ and it is an interesting and hopeful fact that 'women have from the first taken part in such movements, despite their traditional "lowly" status in India'.⁵

The Women's Problem.

The foregoing account does not attempt to describe all the agencies working for the betterment of the

¹ Such as the Bombay Presidency Women's Council and the Depressed Classes Missionary Society of India.

² For an account of the growth of Trade Unionism, vide *The Labour Movement in India*, R. K. Das.

³ Miss Wingate, answering questionnaire.

⁴ *Labour in Indian Industries*, G. M. Broughton, 1924, pp. 189-90.

⁵ *The Economic Development of India*, V. Anstey, 1929, p. 32.

industrial worker in India,¹ but although 'qualitatively invaluable the work done is still quantitatively negligible',² especially as far as women are concerned. Moreover, there are certain special reasons why women cannot take advantage of the welfare activities provided for them.³ '(1) They have not the comparative leisure that men have. (2) Unless the Welfare Centre of the mill is very near, they cannot go out of their houses after a certain hour in the evening on account of the social restrictions put on them. . . . Whatever help is given to the women it must be taken right to their door, at least in the initial stages.'³

Suggested Remedies.

Miss Tilak suggests that 'a worker will be needed to do all such work of creating interest in the people by personal methods and friendship. . . . We will call this person simply a "social worker". She is not just a health visitor, or a nurse or teacher or organizer, but something of each'.⁴ The need for volunteer work in the industrial cities is stressed also by Miss Wingate, a well-known social worker in India. Both she and Miss Tilak believe that 'this would probably best take the form of Settlement Work'.⁵

Within the factories all authorities insist on the need for women inspectors and some advocate women overseers. Medical facilities are equally necessary. Dr. Curjel

¹ For a full account of Legislation, Welfare Work, and the Growth of Trade Unionism, vide *Industrial Welfare in India*, P. S. Lokanathan. Some of the latest developments in welfare work are described in the 1928 *Note on the Working of the Indian Factories Act*.

² *The Economic Development of India*, V. Anstey, 1929, p. 321.

³ *Women in Modern India*, E. Gedge and M. Choksi, p. 154.

⁴ *Women in Modern India*, p. 160.

⁵ Miss Wingate. Answer to questionnaire.

has worked out a scheme for the medical care of women in mills to be run by a trained health visitor, who would be also a trained nurse midwife, with three midwives under her. Her work would be chiefly preventive and educative, and would include the training of dais and the institution of crèches.¹

Most writers agree on the necessity for more and better crèches, but in Miss Wingate's opinion 'it will be wiser to leave the matter to voluntary effort of both employers and other agencies for some time longer. Unless crèches are well run they may be definitely harmful to the children.'²

The need for medical women emerges very clearly in the question of maternity benefits. 'Such legislation is undoubtedly needed in a country where the female labour is all married labour. It is possible that some modification will need to be made in the Washington provision, e. g. 6 weeks may be reduced to a month.'² Dr. Curjel, thinking of the many women in Bengal mills who hand over all their earnings to their male protector, suggests that 'such benefit should be given partly in the form of food and partly in the provision of facilities for medical relief'.³ But before any such scheme can be workable there must be women doctors to work it.

Better housing is urgently necessary. Many of the difficulties connected with industrial labour—its instability and inefficiency, its poverty and the alleged lowering of moral and social standards among workers—would, it is suggested, disappear if the workers had

¹ *Women's Labour in Bengal Industries*, pp. 39-40.

² Miss Wingate. Answer to questionnaire. Miss Wingate states that there is a demand among the workers themselves for Maternity Benefits.

³ *Women's Labour in Bengal Industries*, Dr. Curjel, p. 23.

houses with the privacy which Indians like instead of the present tenements and lines which are so depressingly like barracks. With better housing, which Miss Wingate maintains¹ 'must necessarily be supplied by the employer in many places', the male workers would bring their wives and families and settle down permanently. The present overcrowding in India's industrial towns inevitably suggests the question whether factories could not be decentralized so that there should be space for workers' settlements to grow up round them.

Fortunately the opinion on such matters both of governments and of employers is more enlightened than in the dark days of the English Industrial Revolution, and one may hope that employers in India will see more and more that they will never obtain the stable labour force which they desire until the worker ceases to look upon the town as an exile, the factory as a prison. In a country where the demand for labour is in excess of the supply and where the female labour is all at the child-bearing age it is in the interests of the employer to consider the health and welfare of his female employees—if only to prevent the waste of potential workers caused by the present high rate of infantile mortality.

Conclusions.

As has been shown, the conditions press hardest on the women, for whom an arduous and unhealthy domestic life is interrupted only by an exhausting day in the factory. The observer is struck by the peculiar helplessness of these women under conditions which in their ignorance they accept as inevitable. Such helplessness

¹ Miss Wingate. Answer to questionnaire.

cries out for reforms, of which the following seem the most urgent.

1. Better housing.
2. Further legislation dealing with such matters as higher pay, shorter hours, maternity benefit, and general factory amenities.
3. Accommodation for the children of women factory workers is urged by many correspondents. The provision of well-organized crèches having swaying cradles, and in charge of trustworthy ayahs, has been advocated.¹ It is essential that these should be well run with close attention to hygiene.

As regards older children an interesting experiment is the provision of schools at the Buckingham Mills, Madras.

4. Provision of women personnel as doctors, inspectors, welfare workers, and social workers of various kinds is the most vital necessity of all.

Training facilities for welfare and social workers are necessary if these are to be recruited. In Bombay a class for training educated Indian women directed by Miss T. N. Tilak is under the joint management of the Y.W.C.A., the Women's University Settlement, and two Missionary bodies. The provision of such opportunities in all the great industrial centres should do much to ameliorate the present conditions.

¹ Cf. *The Christian Task in India*, J. McKenzie, 1929, p. 64.

VII

TWO SOCIAL EVILS

ARTICLES BY DR. MUTHULAKSHMI REDDI AND
DR. JERBANOO MISTRI

Compiled by A. R. CATON

THE world problem of prostitution must in India be dealt with under two headings, viz. religious and commercial prostitution.

I. THE DEVADASIS, OR RELIGIOUS PROSTITUTION.

The immemorial custom of dedicating young girls to the service of Hindu temples is chiefly to be found in Southern Indian. 'Every Tamil temple of note in Southern India has its troupe of these sacred women. Their official duties are to dance twice a day, morning and evening, in the temple.'¹ Dedicated as children to the temples, they are 'formally married, sometimes to the idol, sometimes to a sword, before they enter on their duties'.²

The community in Madras alone numbers 200,000.³ These women supplement the meagre allowances which they get from temple service⁴ by performance on social occasions. They can never be widows because they have never been married. 'Hence the auspiciousness of their presence at betrothals, marriages, feasts of all sorts.'⁵

¹ *Golden Bough*, James Frazer. Adonis, Attis, Osiris, vol. i, p. 61.

² Ibid.

³ *Manifesto to Madras Government by Members of the Devadasis Association*, Aurora Press, Madras, 1927, p. 8.

⁴ *Report of 40th Indian National Social Conference*, 1927, p. 32.

⁵ *Things as They Are*, A. Carmichael, p. 189.

Although the ostensible profession of the women in this community is singing, dancing, services in temples or in private families, their duties involve a life of prostitution.¹

This system of dedication belongs to an hereditary community, but in order to recruit new members, 'the custom of adopting female children is in vogue in this community on a very large scale. These girls are generally the offspring of widows gone astray, or orphans, or are bought from such parents as are too poor to support them.'²

The following short article has been contributed by Dr. Muthulakshmi Reddi, former Deputy President of Madras Legislative Council, and the promoter in Madras of recent legislation to abolish the custom.

'Definition of a Devadasi. A devadasi is an unmarried Hindu female who has undergone a ceremony of false marriage with an idol either in a Hindu temple, or to any idol outside, which ceremony goes by the name of "dedication".

'The devadasi system prevails in the Presidency of Madras, where they are found in large numbers in every town, and in the South Indian villages, wherever there is a Siva or Vishnu temple, and also obtains in certain districts of the Bombay Presidency, as the pamphlet that has been published by the Bombay Vigilance Association³ will show, and in the province of Assam and in Bengal.

¹ *Indian Social Reformer*, 8 February 1930, p. 380.

² *Prostitution under Religious Customs*, Report by P. G. Naik to Bombay Vigilance Association, p. 7.

³ *Prostitution under Religious Customs*, P. G. Naik, 1928. In this pamphlet the numbers in the community in Goa, Savantwadi, Kanara, and Ratnagiri are estimated at 25,000, p. 6.

'In the first place, I desire to point out that they do not live in the precincts of the temples and they only visit the temples morning and evening to perform the service of singing and dancing and to follow the procession of the idols. At other times they live in their own homes, which are at a distance from the temples. Only a small percentage of the total number of the devadasis serve in the temples, for which they receive payment either in cash or by the settlement of cultivable lands in their names.

'Secondly, All of them are unmarried, literate, and accomplished in music and dance, and the majority amongst them earn their livelihood through prostitution, which being sanctified and tolerated by the Hindu Society, they consider to be a lawful and honourable profession. No doubt a small percentage among the devadasis contract permanent alliances with caste Hindus, and remain true and faithful to them to the end of their lives. These devadasis being accomplished, do not like to associate with the depressed and the low caste Hindus, and hence invariably choose their lovers from the Brahmins and other high caste Hindus.

'Thirdly, As these women are only forced by a wicked custom to lead a promiscuous life, and do not take to that life by their own choice or inclination, they are very amenable to reform, and I have many capable and willing women social workers of that class to help me in my propaganda and rescue work. A good number of the children of the devadasis, having enjoyed the benefit of modern education, and having been weaned from those evil influences of false religion and custom, have come to occupy a high social status by sheer merit and industry, in spite of the stigma attached to their

origin, and the prejudices of Society against them. So the reform and rescue work among the devadasis is very fruitful as they are very different from the brothel prostitutes.

‘I see no inherited weakness or innate tendency in them to vice. For example, if a devadasi happens to have four daughters, she may dedicate one girl to the temple, and marry the other three girls to men of the same caste, or occasionally to men of other castes, when the married girls do not show any abnormal tendency, and are wonderfully clean, chaste, and virtuous, while the one girl who has been dedicated may be leading a prostitute life in the same house, because the girl who is to become a devadasi through the ceremony of dedication is brought up under the unhealthy notion that once she has undergone the ceremony of dedication, she becomes the god’s damsel. As such she cannot marry, but she can lead a free and promiscuous life for which she will not be punished, either in this world or in the next world, as she has come into this world only to work out her past evil “karma” through a life of prostitution. On the other hand the girls who are to be married are taught that they will reach heaven only if they are true and faithful to their wedded husbands.

‘So the early training and the inculcation into their young and impressionable minds of these strange notions about religion, individual morality, and conduct, are largely responsible for their immoral life later on.

‘Now through the spread of education and modern ideas, the community themselves are becoming alive to their degraded condition, have organized reform

associations, and are engaged in educational propaganda against the evil practice on an immense scale.’¹

Attitude of the Devadasis.

The opinion of the Devadasi Community on the subject of reform appears to be divided. A manifesto submitted to the Madras Government from Members of a Devadasi Association in Madras, states that ‘The intention to stop the practice of worship, music and dancing in temples is anti-Hindu in spirit since it is part of the recognized service to God by the Auspicious Women; being so it affects the entire society and deprives religious worship of one of its adjuncts.’²

But another manifesto signed by devadasis representing the devadasis in Andhra and Tamil Nadu is as follows:

‘We humbly beg to submit that the practice existing in this presidency of dedicating young girls to temples and performing “Gazzela Puza” is fraught with the greatest danger to the women of this community in particular and to the society in general.

‘Whatever may have been the reasons for this practice in ancient times, it is now an established fact, we are sorry to confess, that the devadasis are forced to lead an immoral life.

‘We are initiated at a time when we could not for ourselves discriminate the consequence of our future life and some of us are recruited from other classes for this life of ignominy. It has been our unfortunate lot to

¹ Article by Dr. Muthulakshmi Reddi, contributed to Women of India Survey.

² Quoted Presidential Address of Hon. V. R. Pantulu at the Andhra Desa Kalavantulu Conference, 29 July 1928.

be spited by all and we bitterly experience the pangs of our miserable existence. We endure the difficulties in silence and can only curse the custom and the women who have victimized us. . . .

'We beg to draw your immediate attention to the necessity of protecting the minor girls of this community, who are daily subjected to the danger of life-long serfdom. It is our earnest desire that the innocent creatures should be saved from the clutches of people who want to make a living out of the immoral life of the girls.' ¹

Ameliorative Measures.

Previous Legislation.

Measures to abolish the system of devadasis have taken roughly three forms: (1) an age limit below which the disposal of minor girls for purposes of prostitution is illegal, (2) prohibition of the ceremony of dedication to temple service, (3) the enfranchisement of land-holding devadasis from the necessity of giving their services in temples as a condition of holding such lands.

An Act came into force in 1925 which amended Sections 372 and 373 of the Indian Penal Code dealing with traffic in minors, and made these include disposal of girls dedicated to temples. According to Dr. Reddi matters were not improved by the Act, as in country districts even minor girls continued to be dedicated to gods in defiance of the Penal Code,² while in the cities the law was 'rendered ineffective by the parents or guardians of the girls waiting till the completion of the eighteenth year and then dedicating them to the

¹ *The Awakening, A Demand for Devadasi Legislation*, 1928, p. 6. India Printing Works, Madras.

² *Hindu*, 9 February 1929.

temples. Many a girl has been brought to me for a certificate.’¹

The second and third methods of attacking the evil are embodied in legislation promoted in 1910 by the Maharajah of Mysore and by Dr. Reddi’s Act (passed in 1929 in Madras) which adds a proviso to Section 44 of the Hindu Religious Endowments Act. The Mysore Act prohibits the ceremony of dedication in the temple, while Dr. Reddi’s Act² prevents forfeiture of the land and emoluments granted to devadasis for their services when these are no longer required.

Further Measures.

Dr. Reddi writes in the *Hindu*, 9 February 1929: ‘this legislation is only the beginning of our rescue and reform work . . . much remains yet to be achieved in that direction. A provision is also necessary in the Hindu Religious Movement Act to the effect (1) that no expenditure should be incurred by the temple trustees on the devadasis service of singing and dancing; (2) no dedication should be permitted within the precincts of the temple whether the girl is a major or a minor; and also an amendment to the Children Act to the effect that no immoral mother is entitled to the guardianship of her own children is very essential and adoption by immoral women should be prohibited by law.’

A second Bill³ was recently introduced in the Madras Legislative Assembly by Dr. Reddi, prohibiting the performance of dedication of girls to Hindu temples

¹ *Why should the Devadasi Institution in the Hindu Temple be Abolished?* p. 7. Reprint of speech by Dr. Reddi in Madras Legislative Council, November 1927.

² Applies to Madras Presidency only.

³ Abolition of Dedication of Women to Temples Bill.

within the precincts of any temples. The Bill also legalizes the marriages of such girls when contracted after such dedication.¹

Dr. Reddi moved that the Bill should be referred to a Select Committee, but at the instance of Sir Krishnan Nair a motion to circulate it was carried, 13 voting for circulation and 9 against. In her speech Dr. Reddi regretted the delay involved by circulation, stating that the Government was already committed to the principles of the Bill.²

Similar legislation is to be introduced in the Bombay Legislative Council, and in the Legislative Assembly Mr. M. R. Jayaker is about to introduce a comprehensive Bill to extend to the whole of British India.

The latter will make illegal the performance of any ceremony of dedication, both outside and inside the precincts of the temple. The measure also enfranchises landholding devadasis from service to temples, substituting a quit rent after determining the amount of rent payable in respect of such lands.³

Elsewhere Dr. Reddi writes:⁴ 'The pimps and profiteers who are present in every country catch hold of little girls and dedicate them to the idols to trade upon the vice of prostitution. Government ought to enact measures to punish dedication at any stage, by any one, either parent or guardian, as a penal offence, and authorize the District Magistrates to deal with such offenders severely.' Again, she states:⁵ 'Government officials in the Assembly have always ignored the progressive Indian view in social matters, while they have

¹ *Indian Social Reformer*, 8 February 1930.

² *Ibid.*

³ *Ibid.*, 1 February 1930. ⁴ Article sent to Women of India Survey.

⁵ Letter to Women of India Survey.

showed too much anxiety to respect the orthodox sentiments which have been suicidal to the social and moral welfare of the Indian masses. . . It is beyond my comprehension how European officials (Christians by birth and training) coming from a cultured and civilized country make up their minds to side with those who are in favour of continuing the evil practices.'

Space does not permit of more than the mention of the work of societies such as the Indian Ladies' Samaj, Madras, for the protection of minor girls of devadasis, and the rescue work of Miss Amy Carmichael in Tinnevely. Reference should also be made to the anti-nautch movement, which deals not only with the devadasis but also with all women 'who utilize their position as exponents of the great arts of dancing and music as an ante-chamber to a loose and unregulated life'.¹ This movement is claimed by one of its founders, Mr. K. Natarajan, to have 'largely eliminated nautch women from social functions'.¹

The All-India Conference is interesting itself in these matters and supports Dr. Muthulakshmi Reddi in her determined efforts to abolish the custom. In her address to the Madras Legislative Council, November 1927, Dr. Reddi states that this practice is 'prevalent only among certain sections of the Hindus in Southern India, but as it affects the morality, health, and well-being of the Hindu Society at large it loses its communal nature, and becomes a question of national importance and interest.'

¹ *Report of 40th Indian National Social Conference*, 1927, p. 32.

II. COMMERCIAL PROSTITUTION.

Recognized vice areas exist in the great cities of India, although there is no system of licence for houses of ill-fame.

The worst examples of this evil are to be seen in the chief ports, in particular in Calcutta and Bombay.

Mr. C. F. Andrews writes in 1928:¹

‘The village life of India as a whole is comparatively free from this grosser form of the social evil, such as has appeared in the modern rising towns. The very rapidity with which these new towns have arisen has brought with it an immense preponderance of men over women. The men who have flocked into the towns seeking work are most of them young. Their passions are roused by the unnatural life they live. In a great number of cases they take to some form of drug or intoxicant, which increases passion. They are crowded into living rooms where no decency is possible and where modesty cannot be preserved. The wonder is that the evil has not become worse than it is to-day. In Perambur, a workmen’s quarter of Madras, close to the Carnatic and Buckingham Mills, I found the percentage of women only 30 per cent. in proportion to 70 per cent. men. Taking into account the intensely laborious and monotonous life of the mills, is it to be wondered at that men have taken to drink and vice?’

Calcutta.

In Calcutta the number of prostitutes recorded in the census of 1921 was 10,000.² The Vigilance Association

¹ *The Shield*, A review of Moral and Social Hygiene, published by the Association of Moral and Social Hygiene (September 1928).

² Mr. Herbert Anderson stated in an address reported in the *Shield*,

has ascertained that between 1,600 and 2,000 girls of from 9 to 13 years of age were detained for immoral purposes in Calcutta brothels and that the number was increasing yearly. Many of these children were kidnapped from villages and sold.¹

In *Calcutta Vice*, a pamphlet published in 1921 by the Rev. Herbert Anderson as a result of an investigation made by him at the request of the Commissioner of Police, the different classes of prostitutes are described. 'Calcutta has different degrees of prostitution, each with its different class of prostitute, a varying range of fees, and a different clientele. There is the busti prostitute. She hires one room. . . . She is independent and caters for a fee of a few annas to that large proportion of the industrial population that have no home life.' Secondly, 'A considerable proportion of what have been termed household prostitutes are really slave-debtors, and in such virtual restraint, owing to the conditions of their life, that they do not know how to get free. . . . A third class of prostitute is found in the kept mistresses of well-to-do men, and dancing girls.'²

Dealing with those who make commercial gain from vice he includes: 'the landlords of prostitutes' houses. Many of these are regarded as respectable members of the society in which they live, but in reality they are the chief offenders—the vampires of our civic life. A second class of exploiters are the men and women—mostly women—who keep the houses of ill-fame. The women, called barriwallas, are in many cases ex-prostitutes who give up the last years of their lives to the encouragement (April 1930), that 'the tolerated areas of Calcutta necessitate annually (approximately) a renewal of from 1,000 to 1,500 girls.'

¹ *Annual Report, Calcutta Vigilance Association*, 1925-6.

² *Calcutta Vice*, by Herbert Anderson, p. 5. Baptist Mission Press, 1921.

of vice among those of their own sex. A third class of exploiters are the procurers, procuresses, and pimps. In recent census tables there were over 2,000 in Bengal who actually professed to be engaged in the business. There is still another class who make something out of the city's vice—viz. the taxi and gari-wallahs who drive their fares to immoral houses.’¹

Elsewhere he deals with steps to eradicate prostitution: ‘It can no longer be tolerated as an open, organized, and prosperous business. The rescue and protection of children unlawfully obtained is clearly the first stage. A crusade against all men and women having any financial connexion with the vice is the second step. Landlords, procurers or procuresses, pimps, owners or drivers of licensed vehicles, and all who abet immorality, for financial gain, are criminals that the law should be able to deal with much more effectively than at present. And the third step is a policy of actually decreasing year by year the number of resorts in active operation, diminishing the area scope of the vice, till it becomes no more than a temporary hazardous business, conducted for the most part by individual prostitutes themselves and subject to the condition that on application of three householders paying municipal taxation, any house of ill-fame within 500 yards should be closed and not permitted to reopen.’²

In Calcutta the Suppression of Immoral Traffic Act of 1923 was promoted by the Vigilance Association, to which body most of the progress seen in the last fifteen years is due. This measure, together with the Calcutta Children's Act, empowers the police to remove

¹ *Calcutta Vice*, by Herbert Anderson. Baptist Mission Press, Calcutta, 1921, pp. 19–22.

² *Ibid.*, pp. 15–16.

minor girls from brothels. Amongst other provisions, houses of ill-fame may be closed under the Act if in main thoroughfares or if adjacent to churches and educational buildings.

Amendment to the Act is urgently needed in order that the words 'male person' may be altered to include female brothel keepers. A Children's Court has been established and a Home for rescued minor girls in addition to those provided by Christian Missions.

Bombay.

The following article contributed by Dr. Jerbanoo Mistri deals with Bombay.

'Present Conditions.

'It is not a question which concerns Europeans or Indians only, for the evil is common to all races, ranks, and creeds. According to the latest census figures supplied to the Government Prostitution Committee in 1921 there are in our city over 5,000 women publicly carrying on the trade. The houses of ill-fame are divided into two classes. In the 1st class there are about 100 Japanese and about 150 Europeans, Anglo-Indians, and Bagdadi Jewesses. The houses are well kept and the inmates are clean and the hygienic rules are enforced. The earnings are equally divided between the women and the brothel keepers. During the war this class was almost entirely monopolized by the officers, and the charge of each woman was Rs. 100/- per night. The number of Europeans is much smaller now than it was before the war owing to the tightening of the law about the admission of undesirable foreigners. In the 2nd class there are roughly 5,000 prostitutes, mainly Hindus and Mohammedans. Many of these houses are crowded

dens where human beings live and trade in utmost misery and degradation. The better class pay 50 per cent. of their earnings to the brothel keepers. In the lower class houses, which form the majority, the keepers take all the money that comes in and the women simply receive food and clothing. Usually a number of women are accommodated in one small room, the beds being separated by partitions. Often they are made to serve as many as a dozen masters a day, ill or well. They are compelled to ply the trade even when suffering from acute forms of venereal diseases. Generally they are obliged to take drugs like opium and drink to keep up their spirits. It is customary for keepers to advance money in order to keep them under the bondage of debt. Many live semi-family lives, keeping children with them, who if girls are early inured to the trade.

'The outstanding feature of the evil is that many of the victims are mere girls in their teens, caged like beasts, year in and year out. Many of them are victims of circumstances and deserve our sympathy. Some are thrown into the trade by their parents or interested parties much against their will; others by Pathan money-lenders who sometimes terrorize poor people into giving up their young girls when they cannot pay the money they have borrowed at an exorbitant rate of interest. Procurers marry girls up-country, and then bring them to Bombay and throw them into the trade. Again innocent girls are lured from their homes by harmless looking advertisements for a governess, companion, or secretary. Poverty drives some to take to the trade. Many of them live in a hell on earth through the tyranny of keepers or the ravages of venereal diseases which literally eat away their lives. Thousands of these

victims are yearly caught, sold, used and destroyed, and pass out of the minds of people.

‘The houses of ill-fame are situated in thoroughfares traversed by tramlines, where women stand at the windows making indecent gestures to attract the attention of passers-by. These houses are an unnecessary temptation in the way of our young men and accustom the mind of young people and growing children to the idea that the evil is a necessary and inevitable part of the order of our social system.

‘Clandestine Classes.

‘Besides the public class there is another class of some thousands who practise the trade clandestinely either for the sake of pleasure or in order to be able to satisfy their expensive tastes, or because they cannot marry again. They deserve the strongest condemnation as they ruin the foundation of society. By virtue of having opportunities of mixing freely with men and women of good families and leading them astray, they ruin the happiness of many homes, while the law cannot touch them.

‘In the absence of control from the authorities, the walls of the houses on the inner parts of the city and the columns of some newspapers, particularly vernacular, are full of advertisements of quack remedies for the treatment of venereal diseases, increasing virility, &c. These prematurely rouse the curiosity of children and help to ruin young people.

‘Thanks to our system of education in which neither character formation, religious and moral nor technical training is included, it is becoming increasingly common for our young men to put a premium on their educa-

tional qualification. When the average earning capacity of men in India is about Rs. 150/- to Rs. 200/- per month it is easy to imagine how a man with four or five daughters finds it impossible to give each of them a dowry of Rs. 4,000 to 5,000.

'Hereditary prostitution: Among some communities there are certain families in which the profession is hereditary, and girls are not often allowed to marry but compelled by the family to carry on the trade. It is more or less here that women are kept as mistresses on a charge of Rs. 100 to 500 per month.

'History of the Movement to Combat the Evil.

'It is a healthy sign of the times that the evil is being viewed in its true perspective and a band of well-wishers and social workers have set before them the task of remedying it. What is a matter of greater satisfaction and importance is that Indian women have taken an active part from the beginning. In the year 1919 the Bombay Presidency Women's Council and the Y.M.C.A. with the assistance of other associations in the city took steps to find out the actual state of affairs. Their findings when placed before a public meeting of the religious, educational, and social leaders resulted in the formation of the Bombay Social Purity Committee in 1920. This Committee after carrying on careful investigations sent a Memorandum to Government to do something in the matter, and the following year the Government Prostitution Committee was appointed. For the first time in the history of Bombay, or India for the matter of fact, two women, both doctors, an Indian, the writer herself, and a European, Dr. E. Turner Watts, were appointed to serve on it. The result of this Com-

mittee's report is the passing of the Prevention of Prostitution Act of 1923,¹ which makes the following illegal:

- (1) Soliciting in public places, (2) admission of prostitutes to places of amusements, (3) any person living on the earnings of a prostitute, (4) procuration, (5) importing any girl with the intention of making her a prostitute, and (6) empowering the police to remove these women from the main localities.

'After the enactment of the above Act the Social Purity Committee changed its name to the Bombay Vigilance Association, and to it are affiliated all the important associations in the city. This association maintains a shelter for women rescued by its workers as well as those sent by the magistrates. A Rescue Home for Indians is maintained by the Bombay Presidency Women's Council and for Christians by the League of Mercy.

'The passing of the Bombay Children's Act in 1927 and the opening of a Juvenile Court and a Remand Home are gradually helping to solve the difficult problem of the minors in the brothels.'²

Legislation.

A law to amend the Bombay Prevention of Prostitution Act 1923 has been introduced into the Bombay Legislative Council. By this Bill the definition of a brothel is made more comprehensive (instead of applying only to a place permitted by the occupiers for this use by outsiders). An important amendment makes illegal the keeping of brothels by women as well as by men, and thus abolishes the practice of brothels being nominally kept by women though really controlled by

¹ Of Bombay.

² Article by Dr. (Miss) J. Mistri contributed to Women of India Survey.

men. The punishment for brothel keeping is enhanced to 3 years' imprisonment and made cognizable and non-bailable. Sections are also inserted to penalize landlords who allow their premises to be used as brothels. The police are given greater powers for the arrest of pimps and procurers.¹

Madras.

In Madras the Vigilance Association and the Women's Indian Association promoted some years ago a Bill to suppress brothels and immoral traffic. After much delay this Bill has recently become law. It aims at the suppression of brothels and immoral traffic in the Presidency, and penalizes (as does the recent amendment to the Bombay Act) women as well as men who are responsible for houses of ill-fame.

In 1920 a Children's Act was passed in Madras. The Society for the Protection of Children deals with destitute children under the Act, and the Children's Aid Society deals with delinquent mental and diseased children.

The Act recently promoted by Dr. Reddi amends the Madras Children's Act and brings it into line with the English Act of 1908, and the Bombay and Calcutta Acts. These contain provisions not only for the removal of children from unhealthy and immoral surroundings but also deal with offences against children, e.g. cruelty, inciting children to beg or wager or to be given intoxicating liquor, or encouraging the seduction of minors. A further clause is added to prevent the training by devadasis of girl children for a life of concubinage or prostitution.²

¹ *Indian Social Reformer*, 1 March 1930.

² *Stri Dharma*, November 1929, p. 586.

The Madras Children Act of 1920 deals with the provision of schools for juvenile offenders and non-offenders destitute or in immoral surroundings, their management and inspection, auxiliary homes and the commitments of offenders to such schools, the establishment of juvenile courts, and the control of custodians over children.

Traffic in Women and Girls.

For the market existing in Bombay and in other Indian cities prostitutes are recruited by up-country traffic.¹ In the recent *Report of the Age of Consent Committee* there is evidence that this traffic exists in many parts of India.

In the Punjab : 'There is a regular traffic in girls, practically of all ages, in the Punjab in general. Some people procure girls from the neighbouring Provinces also. The evils appear to be due to the paucity of female population in this Province.'²

In Delhi Province : 'It is said that there is a regular traffic in girls between 13 and 20, practically from all classes. They are said to be sent to the Punjab where demand for them is great owing to the paucity of girls in that Province.'³

In Bombay Proper and surrounding tracts : 'Brothels are largely responsible for seduction and abduction of young girls, and several victims have been rescued from their terrible fate from these dens by the Vigilance and other Societies that are working in Bombay.'⁴

In Sind : 'There are three evils—one is cattle lifting;

¹ *Report of the Prostitution Committee, Bombay, 1922, p. 8.*

² *Report of Age of Consent Committee, p. 29.*

³ *Ibid., p. 34.*

⁴ *Ibid., p. 42.*

the second is women lifting, and it is common in the villages; the third is the kidnapping of minor girls. People bring girls from Cutch and Kathiawar and sell them.’¹

In Madras: ‘As regards cases of seduction and abduction, it appears that Oriya girls below 18 are seduced in large numbers and taken to other Provinces. Likewise there is some trouble regarding prostitutes and devadasis also.’²

In Bengal: ‘Prostitution begins at an early age, . . . girls of 11, 10, or even 9 are sometimes found to be carrying on this pernicious trade.’³

In the United Provinces: ‘There is a good deal of traffic in girls in some parts of the United Provinces. Girls are abducted, kidnapped, and sent to the Punjab where they are sold.’⁴

In the Central Provinces and Berar. ‘Girls of the working and rural classes, between the ages of 15 and 20, are often seduced and abducted.’⁵

Ameliorative Agencies.

Vigilance Associations which co-operate with other organizations for social welfare are at work in the large cities. A Children’s Act, dealing with delinquent children and those in immoral surroundings is in force in Bengal,⁶ Madras,⁷ and Bombay,⁸ and Children’s Aid Societies, or Societies for the Protection of Children in

¹ *Report of Age of Consent Committee*, vol. ii. *Evidence of Witnesses for the Bombay Presidency*, p. 3.

² *Report of Age of Consent Committee*, p. 60.

³ *Ibid.*, p. 76.

⁴ *Ibid.*, p. 86.

⁵ *Ibid.*, p. 91.

⁶ Bengal Children Act, 1922.

⁷ Madras Children Act, 1920.

⁸ Bombay Children Act, 1924.

these Presidencies deal with the rescue of minors and with juvenile delinquents.

The provision of Homes to accommodate girls and women taken from immoral surroundings is one of the first necessities, but is one to which Government has given little financial support as yet. Workers are also urgently needed, and a non-sectarian training scheme is contemplated for which funds will be required.

A terrible feature of the problem is the number of young victims who are drawn yearly into the trade. A woman in difficult circumstances such as the unhappy widow also makes an easy prey to the procurer. In the absence of freedom and economic independence the position of such women is a desperate one. The whole question has been brought of late into the open by the espousal of the cause of reform by women, and it is to be hoped that their influence will have practical effect on public opinion and will promote effective legislation making such commerce in human beings a crime.

The more forward legislation of Rangoon and Colombo should be mentioned. In these cities the houses in segregated areas have been closed. Considerable clandestine prostitution is said to exist in Rangoon owing to the Act¹ not being sufficiently forcible in dealing with brothel keepers. The closure of the tolerated areas has, however, abolished the most degrading form of prostitution, the slave market, where profiteers grow rich on traffic in youthful and unwilling victims.

¹ Burma Act II of 1921.

Conclusions.

To sum up the outstanding needs.

1. More comprehensive legislation is necessary to deal both with the devadasis and the victims of commercial prostitution.
2. More adequate provision of homes is required.
3. A greater supply of social workers and of training facilities is essential.

VIII

CONCLUSIONS

By A. R. CATON

IN this handbook we have attempted to give some account of the women's movement in India, its task in social reform and in the development of the services already existing for women. The questions dealt with are grouped under the headings of education, health, rural and industrial matters, political and professional opportunities, legal status, training facilities for workers, the reforms concerning marriage, widowhood, and the dual moral standard.

The main constructive suggestions which emerge may be summarized briefly under these headings.

Education.

(1) Adequate financial support is the great essential; its lack is the most formidable obstacle to the extension of educational facilities for women whether in the elementary or secondary stages, or as regards the training of teachers.

(2) Improved quality needs attention as greatly as increased quantity; not only are only two women literate in every hundred, but at present three out of every four girls fall out before reaching Class II in some of the most advanced provinces. In order to attain greater efficiency several things are needed:

- (a) The voluntary system of education must be regarded as a wasteful method and one which should eventually be discarded.
- (b) Improved administration and co-ordination is necessary. A Directress of Education who can

advise the Minister for Education is non-existent in six major provinces and an absence of policy results.

- (c) Inspection is a paramount necessity in India in order to attain efficiency; 'in no branch of education is helpful inspection more needed than in the education of girls'.¹ Yet the number of inspectresses is so inadequate that 'in no province has an inspectress less than 4,000 miles to cover; in several she has over 8,000'.¹
 - (d) The provision of women teachers is a *sine qua non* of any extension of education. The present shortage of women teachers is due to (1) the lack of training facilities,² (2) the difficulty of obtaining women to teach in villages, (3) the inadequacy of the pay.
 - (e) Improved buildings and equipment are a further necessity.
- (3) Certain methods and lines of education are discussed in relation to India's special needs; these include
- (a) Education in elementary hygiene and rural welfare.
 - (b) Adult education by means of (1) the school as a community centre, (2) women's institutes.
 - (c) Training for social service, with special reference to training institutions for widows.
 - (d) The use of the cinema and of broadcasting in spreading education.
- (4) All the improvements outlined above depend upon watchful attention to the needs of women by com-

¹ *Interim Report, Statutory Commission*, pp. 160-1.

² In Madras in places where such facilities exist there is a comparatively good supply. Cf. *Interim Report*, p. 179.

petent representatives; at present the province of Madras is almost alone in having adequate representation of women on governing educational bodies.

Health.

The devastating prevalence of disease and suffering in India, both in its general aspect and in that affecting women specially, is mainly due to preventable causes. Provision both of medical treatment and of preventive measures is as yet wholly inadequate, and particularly so in the case of women.

A medical authority states that the diseases which ravage India 'are all diseases appertaining to a low civilization'.¹ The conquest of similar conditions in other countries is due to the advance of sanitation and preventive medicine supported by efficient Public Health legislation. This is equally possible in India, for such reforms are 'mere matters of administration and moderate expenditure'.² Success ultimately depends upon (a) sufficient financial expenditure, (b) adequate official machinery and training facilities, (c) popular education in hygiene with consequent increased support of such measures. India's 'hygienic uplift' again largely depends upon the education of her women.

To turn from the general conditions which affect men and women equally to the health service necessary for women, the main needs may be summarized as follows:

(1) Financial support by Government is the only way by which such services can become adequate. The present provision of approximately 400 medical women

¹ Col. Glen Liston, quoted in *Economic Development of India*, V. Anstey, 1929, p. 68. He states that such diseases are not inherently more at home in tropical than in temperate climates.

² *Report of Public Health Commissioner*, 1927, p. 236.

is grossly inadequate to the needs of a female population of about 120 millions in an area equal to Europe without Russia.

(2) Co-ordination is necessary throughout the whole health service for women; this service includes medical training, provision of hospitals, training facilities for nurses, midwives, health visitors, the provision of maternity and child welfare clinics, and general propaganda. As in the case of education a woman should be appointed 'at the Administrative head-quarters of each of the larger provinces to organize, inspect, and secure the best possible medical relief for women'.¹

(3) A Bureau of Maternity and Child Welfare controlled by a medical woman in the Department of the Commissioner for Public Health at the head-quarters of the Government of India, together with a Research Department for diseases of pregnancy and infancy, would secure the attention and support to a subject which has come to be recognized by all civilized countries as one of the most important of national responsibilities.

Civil and Political Status.

The origin and growth of the women's movement is sketched in this chapter.

The main needs may be summed up as:

(1) The need for the further representation of women on Provincial Councils and on local bodies of all kinds. The need of women in the Central Legislature. Until the vast majority of women achieve a much extended franchise their needs will best be served by their articulate leaders as members of such governing bodies.

¹ *The Work of Medical Women in India*, M. Balfour and R. Young, p. 186.

(2) Progressive Indian opinion is alive to the legal disabilities of women; further propaganda should focus public opinion and lead to ameliorative legislation. Inquiries such as the special Committee set up to inquire into these matters in Mysore are of great value. A further suggestion is that of a special and permanent Central Women's Bureau to investigate, with legal help, conditions of injustice to women and to collect information on this subject.

(3) The progress and well-being of women in every field ultimately depends on the trained service of members of their own sex, whether this field be education, health, rural or industrial welfare, political, public, and social work of all kinds. The chief need of all is therefore recruitment and training of personnel. Funds are required for training facilities of all kinds.

Home and Marriage.

The chief constructive suggestions are those dealing with the following:

(1) *Early Marriage.* A continuous campaign will be necessary in order to overcome this established and ancient custom. Success of the new legislation must eventually depend upon (a) proving the age by means of registration both of births and marriages; (b) measures of propaganda to make the legislation known throughout rural as well as urban India, (c) the establishment of institutions giving protection to girl victims, (d) the aid of women as police, as magistrates, and as jurors in dealing with such cases. It is of vital importance that this legislation should become effective, and that a further raising of the age of consent should eventually be possible.

(2) *Purdah*. The removal of this custom is *par excellence* a matter of public opinion. Recent legislation in Turkey has led to the complete abolition of purdah in that country, and this method is advocated by an Indian woman writer.¹ Pending the removal of purdah, educational facilities to those secluded are an essential step towards its abolition.

(3) *Widows*. Reforms concerning these include (1) the right to marry again, (2) provision of training facilities for work of various kinds, (3) the right to inherit property. The provision of some measure of economic independence as an alternative to domestic slavery, or worse, is one of the most urgent of reforms. But apart from humanitarian considerations the widows of India if successfully mobilized and trained could provide valuable services of various kinds for lack of which the community is suffering.

Women in Rural Life.

Drudgery, squalor, disease, and ignorance may be summed up as evils that beset village women. Poverty is accentuated by thriftless customs, traditional methods of agriculture and the unhealthy conditions due to absence of sanitation. Rural evils are thus a vicious circle, the remedy for which is a general and comprehensive method of attack. A well-devised network of welfare schemes on a semi-official basis which should link up the various activities of Government Departments is advocated as a result of experiments made in different provinces. The education of rural women is generally recognized as of basic importance both in its effect upon the new generation and on rural welfare

¹ Dr. Rukmabai in *Women in Modern India*, 1929, p. 147.

generally. Centres for the education of women in villages such as those provided by Women's Institutes or Co-operative Societies should further educational and health and welfare work, and remove some of the difficulties confronting women workers in villages.

Women in Industry.

(1) Provision of better housing should improve both the health and quality of industrial workers.

(2) The provision of welfare schemes in connexion with factories, with provision for the care of small children.

(3) The appointment of medical women, women inspectors, and of welfare workers.

(4) The training of industrial welfare and social workers.

(5) Maternity legislation.

Two Social Evils.

The main conclusions are:

(1) The necessity for strengthening the law. In the case of the devadasis, legislation dealing with the age of consent has proved ineffective. Further legislation is required which shall prohibit the ceremony of dedication altogether, as well as that which frees land-holding devadasis from giving their services to the temples as a condition of such tenure. In the case of prostitution in the great cities (similar to that which exists in most countries) more drastic legislation is also necessary in order to close the present tolerated areas. All classes and both sexes of persons responsible for the trade, whether traffickers, procurers, brothel-keepers, or consenting landlords, should be penalized.

(2) Provision of Homes for the victims of both these evils are a necessary part of any scheme of reform. Government support has been inadequate in this respect.

(3) Social workers are much needed in this field; as yet there are no facilities for training provided by non-sectarian organizations.

In planning schemes of social service women have not yet learnt to demand adequate financial support from Government. This is a first essential. Secondly, the stage of co-ordination and organization has scarcely yet developed in India; movements, official, semi-official, and voluntary, are sporadic and independent. Bureaux to collect information and to co-ordinate the varied activities in different provinces should be a valuable aid to future development.

Thirdly, personnel is the most urgent need of all. There is an oligarchy of leaders at present, and much can be done by these if given scope on governing bodies of all kinds. But a battle cannot be won by leaders alone. Training facilities and propaganda to recruit workers are a supreme necessity.

The final words of the Commissioner of Health in his report for 1927 may conclude these remarks: 'I feel confident that this great Women's movement will work more radical changes in India in a short period than any other force we know of . . . one cannot wish the movement anything but the greatest of success and Godspeed.'

APPENDIX I

THE DEPENDANTS OF INDIAN SOLDIERS

By E. M. BELL (MRS. G. H. BELL)

THE first sepoy was enlisted by the Honourable East India Company in 1748. The first regular battalion of the Crown's army landed in India in 1754. In 1858 the army of the East India Company became the army of the Crown.¹

Personnel.

The Indian Army consists of the Regular Army and the Territorial Force. In addition there are the Indian State Forces. About one-third of the soldiers of the Regular Army are Mohammedans. More than half the army is recruited from the Punjab and North-West Frontier Province. Gurkha battalions are recruited from Nepal. Gurkha soldiers are not British subjects, neither are Pathans. Soldiers from Indian States are members of the British Empire but are not British subjects. A battalion of Indian infantry has an establishment of twenty Indian officers with the Viceroy's commission. There are about 3,200 British officers in the Indian Army. An Indian infantry battalion has an establishment of 12 British officers, or less than that number if British officers are replaced by Indian officers with the

¹ In August 1914 the strength of the fighting services of the Indian Army was 155,423. In November 1918 its strength was approximately 573,500. In 1923 the Indian Army was reorganized and reduced to 138,719 Indian ranks. *The Army in India and its Evolution*, 1924. Issued with the authority of the Government of India. Appendix VIII, &c.

King's commission. These British and Indian officers on leaving Sandhurst are attached to a British regiment in India for one year. The 'Army in India' consists of British and Indian troops under the Commander-in-Chief. The Army is not a transferred subject. 'The Army Administration is represented in the Legislature by the Army Member in the Council of State and by the Army Secretary in the Legislative Assembly.' The Army Member is the Commander-in-Chief; the post of Army Secretary is held by a civilian.

Distribution.

The Provincial distribution of ex-service men who fought in the Great War can best be understood from the following table:¹

	<i>Population in Millions.</i>	<i>Number of recruits raised during the War.</i>
Punjab	20	326,000
United Provinces	47	142,000
Madras	40	46,000
Bombay	20	36,000
N.W. Frontier and Baluchistan	3	33,000
Burma	12	13,000
Behar and Orissa	33	8,000
Bengal	45	7,000
Central Provinces	13	5,000
Assam	6	10,000
Ajmir	$\frac{1}{2}$	7,000

The Army's Influence on Soldiers' Dependants.

No other organization has the same range, scope, authority, and opportunity to inspire ideals and form character in a young Indian manhood that is the *typical*

¹ *Esher Commission's Report.*

manhood of villages. Though the standing Indian Army is so small, its influence in the homes of the martial classes¹ is increased by the reservists, pensioners,² and ex-soldiers of the Great War. The Army is a unique school, a unique life in India. Its military academies, hospitals, messes, and clubs, its athletics, sports, and horsemanship, its ordered cantonments, its thousands of animals, machines, buildings, arsenals, factories, and farms, provide knowledge and experience denied to the isolations of rural life.

Rates of Pension.

The rates of pension have varied from time to time. Though the family pension was increased during the war it was inadequate by 1918, and was again raised. *The Report of the Army in India Committee, 1919-20* (the Chairman was the late Lord Esher), urged:³ 'The veil which hides Indian family life from outside intrusion is a bar to that perfect knowledge which should precede decision; but we feel strongly that any government which sends any soldier of any race to a war in which he loses his life should be actually responsible for providing a pension sufficient to keep his widow and children from want, and should not make its contribution dependent upon the intricacies of a family system which it cannot penetrate.' The Report⁴ advocated small pensions for children in addition to the family

¹ Perhaps best defined as those classes of the population in which military service is an hereditary profession.

² Regimental reunions keep these men in touch with their units.

³ Para. 61, p. 79.

⁴ The Report brought about many improvements in the lot of soldiers and their dependants.

pension. These were given, and are termed children's allowance.¹

Indian officers with the Viceroy's commission, Indian sub-assistant surgeons, hospital orderlies, veterinary assistants, and mechanics, take professional knowledge to villages. Nearly 40 per cent. of Indian other ranks can now read and write in their vernaculars. In the absence of State Aid, or of the development of the family and community into a nation with a national assumption of responsibility for all, the leaven of organization, discipline, and enterprise which soldiers take to their homes is of incalculable value. The women dependants of soldiers are influenced by their ideas, and are cut off by the purdah, poverty, and illiteracy from any other influence that is not local and traditional. The Army's influence, penetrating a village, is as direct as a current of electricity.

It is impossible to give the regulations governing pensions in any detail. An Indian soldier nominates the recipient of the family pension, which his death, if attributable to military service, will entitle his dependants to receive. He may nominate one of the following: his (1) father,² (2) mother, (3) widow, (4) son, (5) daughter. A pension, subject to certain conditions, is continued to other relatives on the death of the original recipient. A family pension is for the support of a family. In addition there are allowances for chil-

¹ A British officer's widow who had toured during the war in the villages of the Punjab had urged this.

² If he is over 50. If under 50 he can only receive the pension if a cripple or otherwise physically or mentally unable to support himself, or if, and for so long as, his son's widow is being supported by him and has not remarried.

dren: (1) to a son until he is 18,¹ (2) to a daughter until she attains the age of 16 years or marries, whichever is later.

Widows, Mothers, and Daughters.

Where the Indian soldier nominates his widow or his mother for the family pension, she gains a certain financial independence. Her responsibilities towards the family do not permit her to regard the pension as an income free from domestic claims, but a widow as a pensioner gains a prestige she otherwise lacks. The very existence of a family pension in a household endows a widow with some power of negotiation, even when her father-in-law or mother-in-law is the recipient of it, for should they refuse to support her the pension can be withheld or transferred, and after an official remonstrance the widow's position probably becomes more tolerable. The daughter's 'child allowance' must be surrendered if she becomes eligible for the family pension. Her 'child allowance' makes her family, if poor, less anxious to hasten her marriage than they would be if she represented another mouth to feed out of the family pension.

The rates of the family pension were raised adequately and at the present time the pension received by a sepoy's widow,² if his death is due to active service³ (if his death is not attributable to his military service no pension is admissible), is Rs. 8 a month. If she has sons under 18

¹ Longer if a cripple, &c.

² If she is nominated for the family pension.

³ The widow of the recipient of the Victoria Cross, Military Cross, and Indian Order of Merit receives a special allowance on the death of her husband, even if that death is not attributable to military service.

and daughters unmarried, they each receive Rs. 2 a month. For higher ranks the pension is higher.

Widows and Children of Indian Officers with the Viceroy's Commission.

With effect from 1 April 1928, a scheme¹ was introduced whereby widows and children of Indian officers (Viceroy's commissions) might be granted compassionate allowances although the officer's death, while serving or after retirement, was not attributable to military service. This allowance cannot be claimed as a right, and is only granted in certain circumstances.

Separation Allowances, &c.

This system does not obtain in the Indian Army. The social system provides the family of an Indian soldier with a share of his home in his village, and the Army allots a certain number of married quarters within the lines (i. e. regimental quarters) of the unit. An Indian soldier when serving in India receives two months' leave a year, which he spends in his village. When proceeding on active service he allots a sum from his pay for the support of his family, and his depot disburses it through the post office. This family allotment is not supplemented by Government contributions.

Ameliorative² Agencies.

Various funds have been raised in order to contribute to the welfare of Indian soldiers and their dependants.

¹ *Indian Soldiers' Board Report* for the year ending 31 March 1928, Appendix V (a), p. 26.

² See *Indian Soldiers' Board Report* for the year ending 1929.

In September 1927 the balance of various funds was made up into the Indian Army Benevolent Fund. Its purpose is the relief of distress among Indian ex-combatants or non-combatants, and the dependants of deceased Indian personnel of the Army in India who are ineligible for assistance from any other military relief fund. The Imperial Indian Relief Fund ceased to exist in December 1922, and its residue of Rs. 10 lakhs, invested in Government securities, is now known as the Indian Soldiers' Board Fund. The Silver Wedding Fund is devoted to the education and assistance of children and dependants of Indian officers and soldiers (including non-combatants) who took part in the Great War or any subsequent warlike operations. This Fund relieves cases of distress among *widows* of Viceroy's commissioned Indian officers who served in a military capacity during the Great War or subsequent warlike operations.

Indian Troops' Child Welfare.

This scheme is in its infancy. Social and benevolent intercourse has taken place between the wives of British officers and the wives and families of Indian officers and other ranks in cantonments from time to time, now here, now there, without leaving any record, probably ever since the Indian army existed. But such intercourse was the exception, and depended upon individual initiative. It certainly existed in at least one Indian infantry battalion from 1907. But just as Infant Welfare received an enormous impetus in England from 1919 onwards, the organization of Indian Troops' Child Welfare in cantonments in India is a post-war development. Only a small proportion of Indian Army

personnel bring their wives and children to cantonments. When their families come to the limited accommodation for married people in the lines, they do not stay for long visits. But that a woman from a remote village should come to a cantonment and while there, even if living in strict purdah, meet educated women for the first—and perhaps the only—time in her life is all to the good. The following description¹ of the recent work in one great northern cantonment must not be taken as stereotyped. The work is in flux, is developing,² and undoubtedly has a great future. In this particular cantonment the Welfare Centre included practically the entire medical care of the wives and families of all Indian soldiers and followers. Technically they were entitled to medical treatment by the doctor who would have attended the unit in which their husbands and fathers were serving, but 'practically all the women were purdah'. The cantonment tried various methods and, being large, was able finally to employ a qualified Englishwoman as dispenser. She received a small salary and had the voluntary assistance of many³ British officers' wives. Dispensaries were started in all the lines of Indian units. Two qualified dispensers, one of whom was a trained Anglo-Indian nurse, and one a British officer's wife who had been a trained nurse, swelled the staff. Local military charities, the Cantonment Board, and the Red Cross subscribed. Indian units promised a monthly subscription of 4 annas per family per month. Drugs were issued free from the

¹ 1928-9.

² Space forbids any description of the varied efforts of units to improve the lot of the women, by enclosing a purdah women's garden in the lines, &c.

³ Some from each unit.

Indian Station Hospital. A British officer's wife acted as Honorary Secretary. 'The infant mortality has decreased appreciably during this year and the Indian soldiers themselves are very keen on the whole movement and are only too anxious to contribute their small monthly subscriptions.'¹ After a certain stage had been attained, Government employed two female Sub-Assistant Surgeons to take the place of the dispensers paid by the Welfare Fund, which hoped to be able to start two small maternity wards.

To sum up.—In spite of tremendous difficulties the military organization in India has succeeded in creating a pension scheme adapted to the needs of the illiterate and secluded women of the martial classes, a scheme applicable to the Brahman and the Pathan, the Gurkha, the Punjabi Mohammedan, the Rajput, the Sikh, and the Mahratta. To safeguard the welfare of all ex-service men, their dependants, and women pensioners, it has instituted the Indian Soldiers' Board, with its Provincial and subordinate organizations. The Board is composed of three members of the Viceroy's Executive Council, the Governor of the Punjab, the Army Secretary, the Adjutant-General in India, and the Financial Adviser, Military Finance. This board administers the various Funds which are so necessary for the welfare of the ex-soldiers, pensioners, and their dependants. From the day that the Indian soldier nominates his mother or wife to be the recipient of the family pension, or enters the birth of his daughter in his sheet roll, the military organization enters into a relationship with those very helpless persons. In spite of caste, purdah, early marriage, illiteracy, remote habitation, and all the

¹ Private letter.

possibilities of deceit, inaccuracy, blunder, fraud, and misrepresentation, the Army tenaciously keeps up its direct communication as to pension, casualty, or other appropriate information. The unit to which a soldier belongs plays its part, the local Indian soldier as member of the District Soldiers' Board shoulders his responsibility. The Deputy Commissioner as President of the D.S.B., and the Touring Officer—a British captain probably—from the battalion, do what they can for the Indian soldier's wife, widow, mother, or daughter, though perforce generally at second hand. Frequently the Deputy Commissioner and occasionally the Touring Officer is accompanied by his wife. Several wives of British officers have toured in the villages, since a British officer's widow did so in 1918 and 1922-3. And in cantonments ameliorative work is developed through the personal touch of educated women and by a scheme of social welfare admirably adapted to the needs and sentiments of those illiterate, ignorant, and lovable women and children it seeks to aid.

Criticisms and Suggestions.

The Army is always short of money. Its critics invariably seek to reduce its expenditure. Clearly it should be willing to increase its assistance to Indian Troops' Family Welfare when its budget permits. Its King George's Military Schools are so admirable that none can doubt the benefit to the daughters of Indian officers with Viceroy's commissions if a small school—a pioneer work—could be started for them. Undoubtedly too it would be appropriate and advantageous to appoint an Englishwoman to the Indian Soldiers' Board so as to bring it into direct contact with those wives,

widows, and mothers of Indian soldiers whose customs prevent them from coming into personal touch with the world of men.

EVA MARY BELL.¹

¹ The author of this article can testify from personal experience to the chivalry and sympathy of the military authorities in India where the welfare of Indian soldiers' women dependants is concerned. She has learned, too, how greatly the women *require* an Englishwoman's presence from time to time, and how much they appreciate it.

APPENDIX II

SUMMARY OF THE REPORT OF THE INDIAN STATUTORY COMMISSION, 1930, IN REFERENCE TO WOMEN.

By A. R. CATON

THE Simon Report is not behind any less important official publication in the emphasis which it lays upon the advancement of India's women as a basic and vital factor in the general progress of the country.

In volume i, the *Survey*, which appeared on 10 June 1930, together with twelve other volumes of Memoranda submitted by the Government of India and by the Provincial Governments, a full and vivid review is made of the vast field for which it is the task of the Commission to evolve proposals for a constitution. After considering the complexities of race, language, community, religion and caste, the predominance of village life, and the urban and industrial conditions, a chapter is devoted to the Women of India which opens with a tribute to the advance in their position achieved since the Reforms.¹

'Except for a mention of the obstacles which social custom sets up in the way of female education, there is hardly any reference in the Montagu-Chelmsford Report to the women of India. It is a striking proof of the change which has come over the Indian scene in the last twelve years that no document discussing India's constitutional system and the directions in which it can be developed and improved could omit the women of India to-day.'

An account follows of the initial steps taken to secure such political emancipation as has been attained, and of movements to promote the progress of Indian Women and of social reform, notably the work of the All-India Women's Conference and the Seva Sadan Society.

¹ *Report of Indian Statutory Commission*, vol. i, ch. 7, p. 49.

The directions in which the advancement of women is of special interest to the Statutory Commission may be roughly summarized as in the political sphere, in the progress of education, of health, and of general social welfare.

The political sphere.

The scope of women's enfranchisement as electors and as members of public bodies is outlined in chapter 7, 'The Women of India'. Further reference to the matter is made in Part III.¹ 'In exercising the option allowed to them of enfranchising women on the same terms as men, the provincial legislatures have made a gesture of high significance. But so long as the qualification for the vote is almost entirely a property qualification, it will remain a gesture, because India's women do not own property in their own right.' Only in Madras does the proportion of female electors to the adult population reach as high a figure as 1 per cent.²

The useful work of women members of Provincial Councils is recognized, in particular that of the former Deputy President of Madras, Dr. Muthulakshmi Reddi.

Education.

A gloomy picture is presented of the position of women's education.³ 'In no province does one girl out of five attend school; in some provinces not one out of twenty or twenty-five. Even more significant are the figures which show how soon the school-days of many girls are over. Four times as many boys as girls attend primary schools; eighteen times as many boys as girls are found in middle schools; and thirty-four times as many in the high schools. Even in the Punjab, where compulsory education has made most headway, it is not applied to girls. There are less than 2,000 women in arts colleges, while the number of men students is over 64,000.'

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 191.

² Vide chart.

³ *Report of Indian Statutory Commission*, 1930, vol. i, ch. 7, p. 52.

Later in the Report¹ the matter is discussed more fully. 'We are in entire agreement with our Education Committee's appreciation of the importance of the education of girls and women in any scheme of national organization. It is not merely that an illiterate female population cripples a nation by the comparative immobilization of a half of its intellectual resources; the whole texture and strength of the national life are largely dependent on the contribution which women make to it, and in existing circumstances this is perhaps even more true of India than of many other countries. No one with any knowledge of India would be disposed to underrate the power which its women wield within the confines of the household. The danger is that, unless that influence is illumined with knowledge, or some idea of the value of knowledge, its weight may be cast against the forces of progress. The resistance offered to new ideas by the uneducated orthodox woman is proverbial. Alike for the training and instruction of the young and for the readjustment of the Indian social system, the Indian woman is, we believe, pivotal. It is manifest that the best teacher for girls and small children in a village school, as elsewhere, would be a well-trained woman, but the difficulties of establishing a service of such teachers in country places are very great, and the supply is very small.'

That the provision of personnel is the crux is fully recognized by the Commission:² 'At present the number of trained Indian women in the professions of teaching and nursing are pathetically few, and the obstacles to increasing their number are great. Yet mass education for girls and small children cannot be made effective throughout the villages of India until there is a large supply of qualified women teachers.' Again, 'The vanguard of progressive women is steadily, if slowly, growing in numbers. It is penetrating fields of public activity hitherto closed to women and, fired

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 392.

² *Ibid.*, p. 52.

with an intense desire to enlist the womanhood of the country for more effective national service, now forms a force such as earlier educational reformers could never hope to count upon to aid the assault on the strongholds of conservatism and reaction. The active entry of Indian women into the arena on the side of educational and social progress is a feature of real promise. Much sagacity, patience and perseverance will be required. The gallant determination of the pioneers is blazing the trail, but much more than a decade of enthusiasm is necessary to break through obstacles which centuries have helped to build up.’¹

Medical provision and general health measures.

As to the need of health workers : ‘The amount of unnecessary suffering caused to women by the lack of medical and nursing aid is appalling.’² ‘Increasing interest is being taken in many places in health centres, and organizations are at work to give some instruction to the untrained dais (midwives), who follow their hereditary profession without any knowledge of the principles of aseptic treatment. But the supply of skilled aid for women in sickness is most gravely inadequate to the need. A memorandum placed before the Commission by the “National Association for supplying medical aid by women to the women of India”, which manages the Countess of Dufferin’s fund, and which formed the Women’s Medical Service for India in 1914, states that there are about 400 women doctors working in India with registrable qualifications, of whom 150 are working under missionary societies.’³

The toll which social customs inflict on women is dealt with :³ ‘There is an excess of males over females in the population of India amounting, according to the last census, to almost nine millions. The gap is at its widest in the age-groups 10 to 20 and may be not unconnected with social

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 393.

² *Ibid.*, p. 52.

³ *Ibid.*, p. 50.

customs and practices such as purdah and early marriage and unskilful midwifery. . . . It will be a matter of great interest and importance to observe whether the increasing attention which is now being given to women's questions and the emergence of a body of opinion among educated women in India which is determined to improve the conditions of female life, do not result in an alteration of the figures for the better.'

Reference is made to the finding of the Age of Consent Committee and the importance of the Sarda Act.¹ 'If this law, penalizing marriage until the wife is 14 and the husband is 18, is adequately observed and enforced, one of its results will be a great impetus to girls' education.'

Memoranda of Central and Provincial Governments.

The dozen volumes published simultaneously with volume i include the Reports of the Committees appointed by the Provincial Legislative Councils, the Memoranda of the nine Major Provinces and of the Central Government.

In volume v submitted by the Central Government a Memorandum on the Development and Working of Representative Institutions in the sphere of Local Self-Government is of interest, since most of the 'nation-building' services function through the medium of local government bodies. Since the reforms these bodies have become largely elective and democratic; official representatives are in a minority and are retained for advisory purposes by means of nomination.²

Except in the Central Provinces the franchise for local boards is limited to male voters.³ Those qualified as voters are in most provinces also eligible for election as 'panchayat-dars' or members of village councils.

Volume v also includes Memoranda on the progress of Education in British India between 1916 and 1926, with a chapter devoted to the education of girls.⁴

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 52.

² *Ibid.*, vol. v, p. 1065.

³ *Ibid.*, vol. v, p. 1089.

⁴ *Ibid.*, vol. v, p. 1204.

A bird's-eye view is here presented of the number of institutions and of scholars in each province, the quinquennial progress in primary, secondary, and collegiate education, the amount of expenditure on girls' education, and any special measures taken to improve it.

In the nine volumes containing Memoranda from the Provincial Governments of the Major Provinces, the women's part in political and educational progress and in health measures is not ignored. Lack of space makes it impossible to give a comprehensive account of the material scattered through these volumes on such subjects. It is interesting to note that literacy amongst women stands higher in Bombay than in any other Presidency, although Madras and Bengal are ahead as regards male literacy.¹

In the Memorandum submitted by the Government of the United Provinces mention is made of constructive schemes.² As regards education, eighteen training classes for women teachers in primary schools are at work in connexion with approved model schools. As regards health measures, the Government of the United Provinces have shown remarkable vigour in tackling medical relief for women, and have 'doubled the grant-in-aid, devoting to this purpose most of the funds available for new expenditure'.³

A scheme has been drawn up with the object of providing every town with a population of over 4,000 with either a woman sub-assistant surgeon, or a trained midwife or dai. The Government have also doubled their grant-in-aid to the Lady Chelmsford League for maternity and child welfare, and record with justifiable pride the reduction of the infantile mortality in the province from 250 to 183 since 1921.

In the Punjab reference is made to the beginnings of the Women's Institute Movement which the Education Department is helping to further.⁴

In the Central Provinces a Committee was appointed in

¹ *Report of Indian Statutory Commission*, 1930, vol. vii, p. 18.

² *Ibid.*, vol. ix, p. 374. ³ *Ibid.*, p. 409. ⁴ *Ibid.*, vol. x, p. 126.

1926 to report on questions connected with the primary and secondary education of girls. It consisted of the Director of Public Instruction, several Inspectresses and four ladies connected with female education. The committee's recommendations include co-education in the primary stages, a liberal provision of scholarships in middle schools, and the training of women teachers.¹

It is evident that the needs of women are appreciated by the many contributors to this monumental report, and the far-reaching possibilities of their advancement are recognized by the Commissioners: 'The women's movement in India holds the key of progress, and the results it may achieve are incalculably great; it is not too much to say that India cannot reach the position to which it aspires in the world until its women play their due part as educated citizens'.²

The volume of Recommendations³ published on 24 June, a fortnight later than the body of the Report, was awaited with much expectation by those hopeful of constructive inspiration. It proved to be something of an anti-climax as regards its recommendations for promoting the interests of women.

As has already been stated, the main aspects of women's advancement which come within the scope of the Commission are in the political sphere, in the growth of education, and in the provision of health measures with special reference to women.

In a country so vast and so largely consisting of primitive rural conditions where the immense majority of women are inarticulate, the securing of opportunity for the highly educated and trained minority, whether in the province of political and public service, or in the education or health services, is a paramount need.

The provision of such opportunity in the political sphere is stressed in the report of the Indian Central Committee,⁴

¹ Vide *Report of Indian Statutory Commission*, 1930, vol. xiii, vol. iii, pp. 29-32.

² *Ibid.*, vol. i, p. 53.

³ *Ibid.*, vol. ii.

⁴ *Report of the Indian Central Committee*, 1928-9, p. 50.

who urge that 'five per centum of the total seats in the Provincial Legislatures should be reserved for women'.

Although the Statutory Commissioners recognize that it is 'highly desirable to facilitate the inclusion of women in the provincial councils',¹ they are unwilling to provide 'by statute or by statutory rule that a certain number of seats in each council *must* be held by women'. They suggest as the only measure to encourage and supplement the presence of women in the provincial legislatures, to provide, by statutory rule or otherwise, that the Governor should exercise certain powers of nomination, and thus supplement the number of elected members. It is to be hoped that this power will be exercised freely until there is some real likelihood of women candidates standing successfully for election to these bodies.

As regards the franchise, the suggestions are more liberal. 'We desire to see a substantial increase in the present ratio of women to men voters.'² The Commissioners suggest adding to the present qualifications two others, that the wife or widow over 25 years of age, of a man possessing (or in the case of a widow, having possessed) a property qualification, should be eligible, and that the educational qualification for those over 21 should apply to women as well as to men.

As regards the education and health services, important recommendations as to the need of the appointment of Women Directors to co-ordinate the work for women in the provinces in both these Departments were made in the Interim Report of the Statutory Commission as regards education, and by the National Association for Supplying Female Medical Aid as regards the health service. Neither of these proposals, nor any organized schemes to recruit and train workers in both these services, find a place in the recommendations of the Commission. A suggestion is made, however, that there should be Central Educational and Medical Bureaux, the former to act as 'a clearing house

¹ *Report of Indian Statutory Commission*, 1930, vol. i, p. 79.

² *Ibid.*, vol. ii, p. 93.

for ideas and as a medium for the diffusion throughout India of new and fruitful methods'.¹ In the latter case the Commissioners state that 'we are convinced that the improvement of public health in India, the increase in the supply of trained nurses and doctors, and the reduction of infant and maternal mortality might be materially promoted, if there were a wider central organization staffed by competent officials, both men and women, whose business it would be to co-ordinate and encourage the work that is so much needed in these directions'.

The needs of India generally, and of India's women in particular, can ultimately be reduced to two basic requirements, trained workers and money. The volume of Recommendations has given little, if any, impetus to the provision of the former, but a hopeful atmosphere is left hanging about the latter. In the Report on Finance it is stated that 'it is both possible and desirable to improve the economic and social condition of the Indian people by a substantial increase in expenditure on the "nation-building" services'.² The manner in which revenue for this purpose can best be raised is discussed at length in the chapter on Finance.

Let us hope that a determined effort will be made to bring to birth the recommendation for such increased expenditure, so pregnant with possibilities of social regeneration, and that those concerned will secure that a fair measure is devoted to the health and welfare of women and of the coming generation, surely the most literal of 'nation-building' purposes.

¹ *Report of Indian Statutory Commission*, 1930, vol. ii, p. 154.

² *Ibid.*, vol. ii, p. 209.

BIBLIOGRAPHY

I. EDUCATION

- BISS, E. E. Report on the Expansion and Improvement of Primary Education in Bengal. 1921. Calcutta, Bengal Sect. Bk. Report. Rs. 1.6.
- Commission on Village Education, Village Education in India. 1920. Oxford University Press. 5s.
- FLEMING. Schools with a Message in India. Oxford University Press. 6s.; paper cover, 3s. 6d.
- GHOSE, A. A System of National Education. 1921. Tagore, Madras.
- GRAY, H. Present Educational Facilities for Girls of the more Progressive Classes. 1914.
- LAJPAT RAI. The Problems of National Education in India. 1920. Allen & Unwin. 6s.
- MAYHEW, A. I. The Education of India. 1926. Faber & Gwyer.
- OLCOTT, M. Village Schools in India. 1926. Oxford University Press. 3s. 6d.
- VAN DOREN, A. B. Fourteen Experiments in Rural Education. 1929. Calcutta Association Press. Rs. 2.
- WHITEHEAD, BISHOP. Indian Problems. 1924. Constable. 12s.

Official and Periodical Publications and Reports.

- Statement exhibiting the Moral and Material Progress and Condition of India. H.M. Stationery Office. 4s. 6d. annual.
- Report on the Progress of Education in India. Government of India. Published quinquennially in 2 vols. Rs. 1.6 and 1.4. Calcutta Supt. Government Printing. H.M. Stationery Office.
- Report on the Progress of Education in each Province. Published annually and quinquennially.
- Interim Report of the Indian Statutory Commission, 1929. H.M. Stationery Office. 4s.

- Report of the Indian Statutory Commission, vol. i (part vi: The Growth of Education). 1930. 3s.
- Report of Calcutta University Commission, 1917-19.
- Report of Conference on Physical Education, 1927. Madras Supt. Government Press.
- Indian Education under the Reforms. Article in the Journals of the East India Association, by J. A. Richey, January 1929.
- A Training School for Village Teachers, A. E. Harper, 1927. Calcutta, Government of India. Central Pubn. Branch.
- Some Experiments in Indian Education. Calcutta, Government of India. Central Pubn. Branch.
- Times Educational Supplement (contains a weekly article on a current topic of Indian Education).
- Teaching. Oxford University Press. Published quarterly. 9 annas. Annual subscription, Rs. 2.8.

II. HEALTH

- BALFOUR, M., and SCOTT, A. Health Problems of the Empire. Resources of the Empire Series.
- BALFOUR, M., and YOUNG, R. The Work of Medical Women in India. 1929. Oxford University Press. 9s.
- BENTLEY, C. A. Malaria and Agriculture in Bengal. 1925.
- HEHIR, P. The Medical Profession in India. 1923. Oxford University Press. 7s. 6d.
- LANKESTER, A. Tuberculosis in India. 1920. Butterworth.
- ROGERS, L. Fevers in the Tropics. Third edition, 1919. Oxford University Press. 30s. net.
- TURNER, J. A., and GOLDSMITH, B. K. Sanitation in India. 1916.
- VAUGHAN, K. The Purdah System and its Effect on Motherhood. 1928. Heffer. 2s. 6d.
- WHITE, F. N. Prevalence of Epidemic Disease in the Far East.
- WINSLOW, C. E. A. The Evolution and Significance of the Modern Health Campaign. 1923.

Official and Periodical Publications and Reports.

- Statement Exhibiting the Moral and Material Progress and Condition of India. H.M. Stationery Office. 4s. 6d. Annual.
- Annual Report of the Public Health Commissioner with the Government of India. Government of India Central Pubn. Branch. 2 vols.
- Annual Report of Chief Medical Officer and Director of Public Health for each Province. Government Press.
- Annual Reports on Public Health in Municipal Areas in each Province. Government Press.
- Annual Reports on Hospitals and Dispensaries for each Province. Government Press.
- Report of City High Mortality, Madras. 1927. 2 parts. 3s. Madras Supt. Government Press.
- Annual Report of the Haffkine Institute. Bombay Government, Central Press.
- Annual Report, Pasteur Institute, Calcutta. Bengal Sect. Bk. Depot.
- Annual Report, Central Research Institute, Kasauli. Calcutta, Government of India. Central Pubn. Branch.
- Annual Reports of the Ross Institute and Hospital for Tropical Diseases.
- First, Second, and Third Reports of the All-India Conference on Sanitation. 1911, 1912, and 1913-14.
- Indian Journal of Economics, January 1924. The Economic Value of Prevention of Disease, by Colonel C. L. Dunn.
- Seventh Congress of the Far Eastern Association of Tropical Medicine.
- Annual Report of the National Association for supplying Medical Aid to the Women of India.
- Annual Reports of the Infant Welfare Societies.
- Annual Reports of the Lady Amphyll Nurses Institute, and the South Indian Nursing Association.

Lady Chelmsford All-India League for Maternity and Child Welfare. Calcutta, Government of India. Central Pubn. Branch.

Report of the Maternity and Child Welfare Conference held at Delhi. 1927. Delhi Printing Works for the League.

Report of Lady Wilson Village Maternity Association. Government Central Press, Bombay.

BALFOUR, M.I., M.B., W.M.S. Maternal Mortality in Child-birth in India. 1927. Indian Medical Gazette.

Anaemia of Pregnancy. 1927. Indian Medical Gazette.

Some Diseases of Pregnancy in India. 1927. Seventh Conference of Far Eastern Association of Tropical Medicine.

Health Organization in British India. 1928. League of Nations Publication.

WILLIAMS, G. BRANSBY. Public Health in India from an Economic Point of View. Address to Rotary Club, Calcutta, June 26-9. Metchin, Printers, Westminster. Indian Medical Gazette.

Indian Journal of Medical Research. Calcutta, Thacker, Spink & Co.

Report of the Committee on the organization of Medical Research under the Government of India. Calcutta, Government of India. Central Pubn. Branch. 2s. 6d.

Report of the Committee on the Indigenous Systems of Medicine, Madras. 1923. Govt. Press, Madras.

RUSSELL, A. J. A Memorandum on the Epidemiology of Cholera. 1929. League of Nations.

SCOTT, A. C., M.B., W.M.S. A Contribution to the Study of Osteomalacia in India. 1915-16. Indian Journal of Medical Research.

Osteomalacia in India. 1927. Seventh Conference of Far Eastern Association of Tropical Medicine.

III. WOMEN IN PUBLIC LIFE

- BHASHYAM AIYANGAR, K. T. *Women in Hindu Law*. 1928.
 . Ganesan, Madras. Annas 8.
- COUSINS, M. E. *Awakening of Asian Womanhood*. 1922.
 Ganes & Co., Madras. Rs. 2.
- DUTT, G. S. *A Woman of India*. 1929. Hogarth Press. 4s. 6d.
- GEDGE, E. C., and CHOKSI, M. *Women in Modern India*.
 1929. Tareporevala, Bombay. 7s. 6d.
- MACNICHOL, NICOL. *Pandita Ramabai*. Student Christian
 Movement Press. 3s.
- India in the Dark Wood, ch. iii. *The Women Aroused*.
 1930. Edinburgh House Press. 2s. 6d.

*Reports, Periodicals, &c., Dealing with the Women's
 Movement.*

- Indian Statutory Commission Report, vol. i, pt. i, ch. 7
 (The Women of India).
- Stri Dharma. Official Organ of the Women's Indian Asso-
 ciation, published monthly, Egmore, Madras. 8s. yearly.
- All Indian Conference Reports, yearly and half-yearly.
- Reports of the International Council of Women in India.
 Biennial.
- Reports of Presidency Women's Councils. Annual.
- The Awakening of Indian Women. Article in the Contem-
 porary Review, November 1929, by Lady Hartog.
- Handbook of Women's Work, Bombay Presidency Council
 of Women. 1928-9. Tutorial Press, Bombay.

IV. HOME AND MARRIAGE AND SOCIAL CONDI-
TIONS IN RELATION TO WOMEN

- BADER, C. *Women in Ancient India*. 1925. Kegan Paul.
- H. H. BEGUM OF BHOPAL. *An Account of my Life*. 1910.
 Murray. 6s.
- CHRISTLIEB, M. L. *An Uphill Road in India*. 1927. Allen
 & Unwin.

GHOSHA, J. The Daughter of Hindustan.

MAYO, KATHARINE. Mother India. 1927. Jonathan Cape.
10s. 6d.

Answers to Mother India:

C. S. Ranga Iyer. Father India. 1927. Selwyn & Blount.

Lajpat Rai. Unhappy India. 1928. Banna Publishing Co., Calcutta.

Natarajan, K. Miss Mayo's Mother India: A Rejoinder. Natesan, Madras.

NIVEDITA, SISTER. The Web of Indian Life. 1918. Longmans.

Studies from an Eastern Home. 1918. Longmans.

RAMABAI SARVASATI. The High Caste Hindu Woman. 1888. J. B. Rodgers, Philadelphia.

ROTHFIELD, OTTO. The Women of India. 1920. Taraporevala, Bombay. Rs. 20.

SORABJI, CORNELIA. Between the Twilights. 1908. Harper & Bros.

The Purdahashin. 1917. Thacker, Spink & Co., Calcutta.

SUMATAI BAI. Women Awakened. Tagore & Co., Madras.

THOMPSON, EDWARD. Suttee. 1928. Allen & Unwin.
7s. 6d.

URQUHART, MARGARET. The Women of Bengal. 1925. Student Christian Movement Press. 5s.

WILSON, MARGARET. Daughters of India. 1928. Jonathan Cape. 7s. 6d.

Trousers of Taffeta. 1929. Cape. 7s. 6d.

Reports and Official Publications, &c.

Report of the Age of Consent Committee. 1928-9. Calcutta. Government of India Central Publication Branch. 2s. 6d.

Legislative Assembly Debates, September 1929, in reference to Child Marriage Restraint Act.

Indian Statutory Commission Report, vol. i, pt. i, ch. 7 (The Women of India).

V. WOMEN IN RURAL LIFE AND SOME GENERAL RURAL QUESTIONS

- ANSTEY, V. *The Economic Development of India*. 1929. Longmans. 25s.
- BRAYNE, F. L. *Village Uplift in India*. 1927. Pioneer Press, Allahabad. Rs. 2.
- The Remaking of Village India*. Second edition of above. 1929. Oxford University Press. 5s.
- Socrates in an Indian Village*. 1929. Oxford University Press. 7s. 6d.
- CALVERT, H. *Wealth and Welfare in the Punjab*. 1922. Civil and Military Gazette Press. 9s. 6d.
- CHATTERTON, ALFRED. *Rural Economics in India*. The Russel Lecture, 1926. Oxford University Press. Rs. 1.
- DARLING, M. L. *The Punjab Peasant in Prosperity and Debt*. Second edition. 1926. Oxford University Press. 11s. 6d.
- Rusticus Loquitor*. 1930. Oxford University Press. 15s.
- ELMHURST, L. K. *The Robbery of the Soil and Rural Reconstruction*. Calcutta, Brahma Mission Press. 1923.
- HOWARD. *Indian Agriculture*. Second edition. 1927. 4s.
- IYENGAR, S. KESHA. *Studies in Indian Rural Economics*. 1927.
- JACK, J. C. *The Economic Life of a Bengal District*. 1916. Oxford: Clarendon Press. 10s. 6d.
- LEAKE, H. M. *Foundations of Indian Agriculture*. 1924. Heffer. 7s. 6d.
- McKENZIE, J. *The Christian Task in India*. 1929. Mac-Millan. 7s. 6d.
- MANN, H. H., and KANIKAR, N. U. *Land and Labour in a Deccan Village*. Study No. 2. 1921. Oxford University Press. 9s.
- MATTHAI, JOHN. *Agricultural Co-operation in India*. 1925. Christian Literature Society for India, Madras.
- Village Government in British India*. 1915. Fisher Unwin. 4s. 6d.

- RAINE, J. L. *The Co-operative Movement in India.* 1928.
 STRICKLAND, C. F. *An Introduction to Co-operation in India.* Second edition. 1929. Oxford University Press. 3s.
 ZIMAND, SAHEL. *Living India.* 1928. Longmans, Green & Co., New York. 10s. 6d.

Official and Periodical Publications.

- Report of the Royal Commission on Agriculture. 1928.
 H.M. Stationery Office. 11s. With Abridged Report, 1s. 6d., and sixteen volumes of evidence.
 Annual Review of Agricultural Operations in India.
 Annual Reviews of the Departments of Agriculture in each Province.
 Agricultural Journal of India (2s. 6d. each issue). Government of India Central Publication.
 Agricultural Statistics of India. Annual, 2 vols.
 Report of Indian Road Development Committee, 1927-8. Calcutta, Government of India Central Publication Branch. 1928. 5s.
 Report of the Working of Co-operative Societies in each Province. Government Press.
 Statement showing the Progress of the Co-operative Movement in India. Annual. Government Press, Calcutta. 1s. 3d.

VI. WOMEN IN INDUSTRY AND SOME INDUSTRIAL QUESTIONS

- ANSTEY, V. *The Economic Development of India.* 1929. Longmans. 25s.
 BOGLE, J. M. L. *Town-Planning in India.* India of To-day Series. Oxford University Press.
 BROUGHTON, G. M. *Labour in Indian Industries.* 1924. Oxford University Press. 9s.
 BURNETT HURST, A. R. *Labour and Housing in Bombay.* 1925.

- DAS, R. K. The Labour Movement in India. 1923. Published in Berlin.
- GADGIL, D. R. The Industrial Evolution in India in Recent Times. Second edition. 1929. Oxford University Press. 7s. 6d.
- KELMAN, J. H. Labour in India. 1923. Allen & Unwin, 10s. 6d.
- KYDD, J. C. History of Factory Legislation. 1920. Calcutta University Press. Rs. 4.8.
- LOKANATHAN, P. S. Industrial Welfare in India. 1929. University of Madras, Economic Studies.
- MATHESON, M. C. Indian Industry, Yesterday, To-day, and To-morrow. Oxford University Press. 3s.
- MUKTA AHMED. Factory Labour in India. 1930.
- READ, M. From Field to Factory. Student Christian Movement Press. 1s. 6d.

Official and Periodical Publications and Reports.

- Statement Exhibiting the Moral and Material Progress and Condition of India. H.M. Stationery Office. 4s. 6d.
- Report of the Indian Industrial Commission, 1916-18.
- Bulletins of Indian Industries and Labour. Government Press, Calcutta.
- No. 8. Indian Factory Law Administration, A. G. Clow. 1921. 7 annas.
- No. 31. Women's Labour in Bengal Industries, D. F. Curjel. 1923. 8 annas.
- No. 37. Indian Factory Legislation, A. G. Clow. 1926. 1s. 4d.
- No. 32. Indian Maternity Benefit Schemes. 1925. 8d.
- No. 35. Employment of Women in Mines. 1926. 1s. 4d.
- Labour Gazette, Bombay Government Press. Monthly. Rs. 1.
- BARNES, F. D., W.M.S. Maternity Conditions of Women Industrial Workers in Bombay. 1923. Bombay Labour Gazette.
- Annual Reports of Chief Inspector of Mines.

Annual Reports of each of the Provincial Departments of Industry.

Annual Reports on the working of the Indian Factories Act. Report of Enquiry into the Wages and Hours of Labour in the Cotton Mill Industry. 1925. Bombay Government Central Press.

India and the International Labour Organization. League of Nations Pamphlet No. 235.

Bulletins of the Provincial Departments of Industry.

Report on Labour Conditions in India, J. Hallsworth and A. Purcell, Delegates of the T.U.C.

Education of Factory Children in India. 1918. Calcutta Supt. Government Printing.

All India Trade Unions Bulletins.

Industrial Housing Scheme. Bombay Govt. Central Press. 1927.

Indian Economic Enquiry Committee.

City of Bombay Improvement Trust Administrative Report. Bombay Times Press.

VII. TWO SOCIAL EVILS

CARMICHAEL, A. Things as they are. Morgan & Scott. Lotus Buds. Morgan & Scott.

PHADKE, N. S. The Sex Problem in India.

Reports, Periodical Publications, &c.

Report of Bombay Prostitution Committee. 1922.

Prostitution under Religious Customs. Report by P. G. Naik to Bombay Vigilance Association.

The Awakening; Demand for Devadasis Legislation. India Printing Works, Madras.

Reports of Indian National Social Conference. Annual.

Reports of Vigilance Associations of Madras, Bombay, and Calcutta. Annual.

Calcutta Vice. H. Anderson. 1921. Baptist Mission Press.

- Legislative Assembly Debates, February 6 and 27, 1922, March 21, 1923, in reference to Traffic in Women.
Speech of Dr. Muthulakshmi Reddi on the Abolition of Temple Prostitutes. Madras Legislative Council, November 1927.

PUBLICATIONS DEALING WITH GENERAL
SOCIAL CONDITIONS, THE PEOPLES OF
INDIA, ETC.

- ALI, A. YUSUF. Anglo-Mohammedan Law.
AMBEDKAR, B. R. Evolution of Provincial Finance in British India. 1925. P. S. King. 15s.
ANDERSON, J. D. The Peoples of India. 1913. Cambridge University Press. 2s. 6d.
ANDREWS, C. F. Mahatma Gandhi's Ideas. 1929. Allen & Unwin. 12s. 6d.
ANSTEY, V. Economic Development of India. 1929. Longmans. 25s.
ARCHER, WM. India and the Future. 1917. Hutchinson. 16s.
BANERJEA, SURENDRANATH. A Nation in Making. 1925. Oxford University Press. 6s.
BESANT, A. India Bond or Free. 1926. Putnams. 7s. 6d.
BEVAN, EDWYN. Thoughts on Indian Discontents. 1929. Allen & Unwin. 6s.
BUCHAN, J. India. Nations of To-day Series. 1923. Hodder & Stoughton. 15s.
CHIROL, VALENTINE. India. 1926. Benn. 15s.
Indian Unrest. 1910. Macmillan. 5s.
COLLET, SOPHIA DOBSON. Life and Letters of Raja Rammo-hun Roy. 1913. A. C. Sarkar, Calcutta.
COTTON, HENRY. New India. 1907.
CRADDOCK, REGINALD. The Dilemma in India. 1929. Constable. 15s.
FARQUHAR, J. N. Modern Religious Movements in India. 1924. Macmillan.

- GANDHI, M. K. *Young India*, vols. i and ii. 1924-6. S. Ganesan.
Speeches and Writings. 1922. G. A. Natesan. Rs. 2.
Autobiography. 2 vols. 1927. Navajivan Press, Ahmedabad. 14s. each vol.
- GARRETT, G. T. *An Indian Commentary*. 1928. Jonathan Cape. 7s. 6d.
- GRAY, R. M. and PAREKH, M. C. *Mahatma Gandhi*. Student Christian Movement Press. 3s.
- HILL, C. H. *India—Stepmother*. 1929. Blackwood, Edinburgh. 12s. 6d.
- HOLDERNESS, T. W. *Peoples and Problems of India*. 1920. Thornton Butterworth, Ltd. 2s. 6d.
- HOYLAND, J. S. *The Case for India*. 1929. J. M. Dent. 4s. 6d.
- ILBERT and MESTON. *The New Constitution of India*. 1923. University of London Press. 5s.
- IYER, C. S. RANGA. *India: Peace or War*. 1930. Harrap. 7s. 6d.
India in the Crucible. 1928. Selwyn and Blount. 7s. 6d.
- JATHAR and BERI. *Indian Economics*. 1929. D. P. Tareporevala, Bombay. Second edition, Oxford University Press, now in press.
- KHUB DEKTA AGE. *India To-morrow*. 1927. Oxford University Press. 3s. 6d.
- LUPTON, A. *Happy India*. 1922. Allen & Unwin. 6s.
- LYALL, A. *Asiatic Studies*.
- McKENZIE, J. *The Christian Task in India*. 1929. Macmillan. 7s. 6d.
- MACNICOL, NICOL. *India in the Dark Wood*. 1930. Edinburgh House Press. 2s. 6d.
The Making of Modern India. 1924. Oxford University Press. 7s. 6d.
- MARVIN, F. S. *India and the West*. 1927. Longmans, Green & Co. 7s. 6d.

- MAYHEW, A. Christianity and the Government of India. 1929. Faber & Gwyer. 12s. 6d.
An Indian Mohammedan. The Indian Moslems. 1928. Ardenne. 7s. 6d.
- MUKERJEE, R. Foundations of Indian Economics. 1916. Longmans. 14s.
- NARAYAN BRIJ. The Population Problem in India. 1927.
- PAUL, K. T. The British Connexion with India. 1927. Student Christian Movement. 5s.
- PILLAI, P. P. Economic Condition of India. 1925. Routledge. 12s. 6d.
- RAY, P. C. Life and Times of C. R. Das. 1928. Oxford University Press. 12s. 6d.
- REED, S., and P. R. CADELL. India, the New Phase. 1928. Phillip Allan & Co. 3s. 6d.
- RISLEY, H. H., and CROOKE, E. W. The People of India. 1915. Thacker, Spink & Co., Calcutta. Rs. 15.
- RONALDSHAY, LORD. India: A Bird's-eye View. 1924. Constable. 18s.
- RUTHERFORD, W. H. Modern India. 1927. Labour Publishing Co. 7s. 6d.
- SENART, EMILE. Caste in India. 1930. Methuen. 8s. 6d.
- SETON, M. The India Office. 1926. Putnam. 7s. 6d.
- SHAH, K. T. Sixty Years of Indian Finance. 1921. P. S. King.
Federal Finance in India. 1929. P. S. King. 12s. 6d.
- SMITH, V. Oxford History of India. 1923. Oxford University Press. 14s.
- SPENDER, J. A. The Indian Scene. 1912. Methuen.
The Changing East. 1926. Cassell. 10s. 6d.
- TREVELYAN, E. J. Hindu Law as Administered in British India. Third edition, 1929. Thacker, Spink & Co., Calcutta. 41s. 8d.
- VAKIL, C. N. Financial Developments in Modern India, foreword by Sir B. Blackett. 1924. P. S. King. 21s.

- VENKATARAMANI, K. S. *Renascent India*. 1928. Sveta-ranya Ashrama, Madras.
- VISVESVARAYA, M. *Reconstructing India*. 1920. P. S. King. 7s. 6d.
- WADIA, P. A., and JOSHI, G. N. *Wealth of India*. 1925. Macmillan. 21s.
- WATTAL, P. K. *The Population Problem in India*. 1916. Bennett & Coleman, Bombay.
- WHITEHEAD, H. *Indian Problems*. 1924. Constable. 12s.
- WOOLLACOTT, J. E. *India on Trial*. 1929. Macmillan. 10s.
- ZIMAND, SAHEL. *Living India*. 1928. Longmans, Green & Co., New York.

Official and Periodical Publications and Reports.

- Report of the Indian Statutory Commission, 1930. H.M. Stationery Office. Vols. I and II. 3s. each.
- Memoranda to the Indian Statutory Commission, 1930, submitted by each Province and by the Central Government.
- Statement exhibiting the Moral and Material Progress and Condition of India. H.M. Stationery Office, 4s. 6d.
- Census of India. 1921.
- The Indian Year Book, ed. by S. Reed and S. T. Sheppard. Pres. of India Press, Bombay. 12s. 3d.
- Report of Royal (Hilton Young) Commission on Indian Currency and Finance. 1926.
- Gazetteer of India.
- General Report of the Indian Economic Enquiry Committee. 1926.
- Report of Indian Central Committee. 1928-9. H.M. Stationery Office. 7s.
- Interim Report of the Indian Statutory Commission. 1929. 4s.
- Indian Taxation Enquiry Committee. 1924-5. Calcutta, 1925-6. 3s. 3d.

- Government of India. Report on Indian Constitutional Reforms. Montagu-Chelmsford Report. 1918.
- Reports of the Local Governments on the working of the Reformed Constitution. 1923.
- Report of Imperial Conference. 1926.
- Report of Imperial Economic Conference.
- Report of Indian States Committee. 1929.
- Parliamentary Debates. Extracts relating to Indian Affairs.
- House of Commons. H.M. Stationery Office.
- House of Lords. H.M. Stationery Office.
- Journal of the Royal Asiatic Society. Quarterly. £3 per annum.
- Asiatic Review, including proceedings of the East India Association, London. 20s. yearly.
- Statistical Abstract for British India. H.M. Stationery Office. Annual. 3s. Decennial.
- The Imperial Gazetteer. 26 vols. 1929. Clarendon Press. £5.
- Provincial Gazetteers. 1908-9. Government Press, Calcutta.
- Budget Speech, Legislative Assembly Debates, Feb. 28, 1930. India House. 6d.
- Statistics of British India.
- Reports of Debates in the Legislative Assembly. Government Press, Delhi and Simla.
- Proceedings of the Legislative Councils in each Province. Government Press.
- Brief Account of Work of the Servants of India Society. Aryabhashan Press, Poona. 1924.

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SOME STATISTICS SHOWING PROVINCIAL DIFFERENCES.

Province.	(1) Population.	(2) Birth-rate per 1,000 population.	(3) Infantile death-rate per 1,000 births.	(4) Death-rate per 1,000 population.	(5) Relative Nos. of		(6) Percentage Literacy. 1921.		(7) Percentage of school-going age receiving primary instruction. 1927.		(8) Number of girls married before age of 15.	(9) Direct expenditure on primary schools in lakhs. 1927.	(10) Expenditure per head of Population according to 1929-30 Budget Estimates in Rupees.		(11) Percentage of electors to adult population.	
					Men.	Women.	Men.	Women.	Boys.	Girls.			Education.	Medical and Public Health.	Male.	Female.
Madras Presidency	42,318,985	36.5	175.4	24.3	20,870,749	21,448,236	15.2	2.1	59.0	17.5	534,649	170.51	0.608	0.333	11.6	1.0
Bombay Presidency	19,291,719	36.85	161.42	25.72	10,138,575	9,153,144	14.1	2.5	49.2	16.8	472,618	198.83	1.057	0.472	13.4	0.8
Bengal	46,695,536	27.7	178.01	25.6	24,151,222	22,544,314	15.9	1.8	45.1	13.2	1,199,856	67.61	0.285	0.210	9.7	0.3
United Provinces	45,375,787	36.72	151.75	22.59	23,787,745	21,588,042	6.5	0.6	30.5	3.9	1,087,379	84.31	0.421	0.145	12.4	0.4
Punjab	20,685,024	42.3	167.50	27.46	11,306,265	9,378,759	6.7	0.8	44.7	6.8	241,746	42.34	0.806	0.391	11.9	0.5
Bihar and Orissa	34,002,189	37.6	133.39	25.1	16,763,866	17,238,323	8.8	0.6	37.3	4.8	861,210	55.86	0.262	0.153	4.6	—
Central Provinces and Berar	13,912,760	45.58	221.60	31.31	6,951,399	6,961,361	8.4	0.7	30.7	4.3	386,959	32.61	0.410	0.158	5.2	—
Assam	7,606,230	30.25	171.35	23.47	3,961,109	3,645,121	11.0	1.3	36.4	6.8	95,747	11.18	0.421	0.289	14.2	0.2

(1) *Census Report, 1921, vol. i, pt. ii, pp. 49-58.*

(2) *Report of Public Health Commissioner, 1927, p. 12.*

(3) *Report of Public Health Commissioner, 1927, p. 14.*

(4) *Report of Public Health Commissioner, 1927, p. 13.*

(5) *Census Report, 1921, vol. i, pt. ii, pp. 49-58.*

(6) *Interim Report of the Indian Statutory Commission, 1929, p. 145.*

(7) *Interim Report of the Indian Statutory Commission, 1929, p. 43.*

(8) *Census Report, 1921, vol. i, pt. ii, pp. 49-58.*

(9) *Interim Report of the Statutory Commission, 1929, p. 44.*

(10) *Report of the Indian Statutory Commission, 1930, vol. ii, p. 233.*

(11) *Report of Indian Statutory Commission, vol. i, p. 191.*

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